

IDAHO VITAL STATISTICS HEALTH DISTRICT REPORT



Division of Health
Bureau of Health Policy and Vital Statistics
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IDAHO DEPARTMENT OF
HEALTH & WELFARE

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IDAHO VITAL STATISTICS HEALTH DISTRICT REPORT

Purpose

There are two main purposes of this report. First, the report provides Idaho resident death trends by district of residence that are comparable over time. Second, this report provides birth and death rates and 95 percent confidence intervals of the rates for the purpose of determining statistical differences in the years shown and among districts and Idaho as a whole.

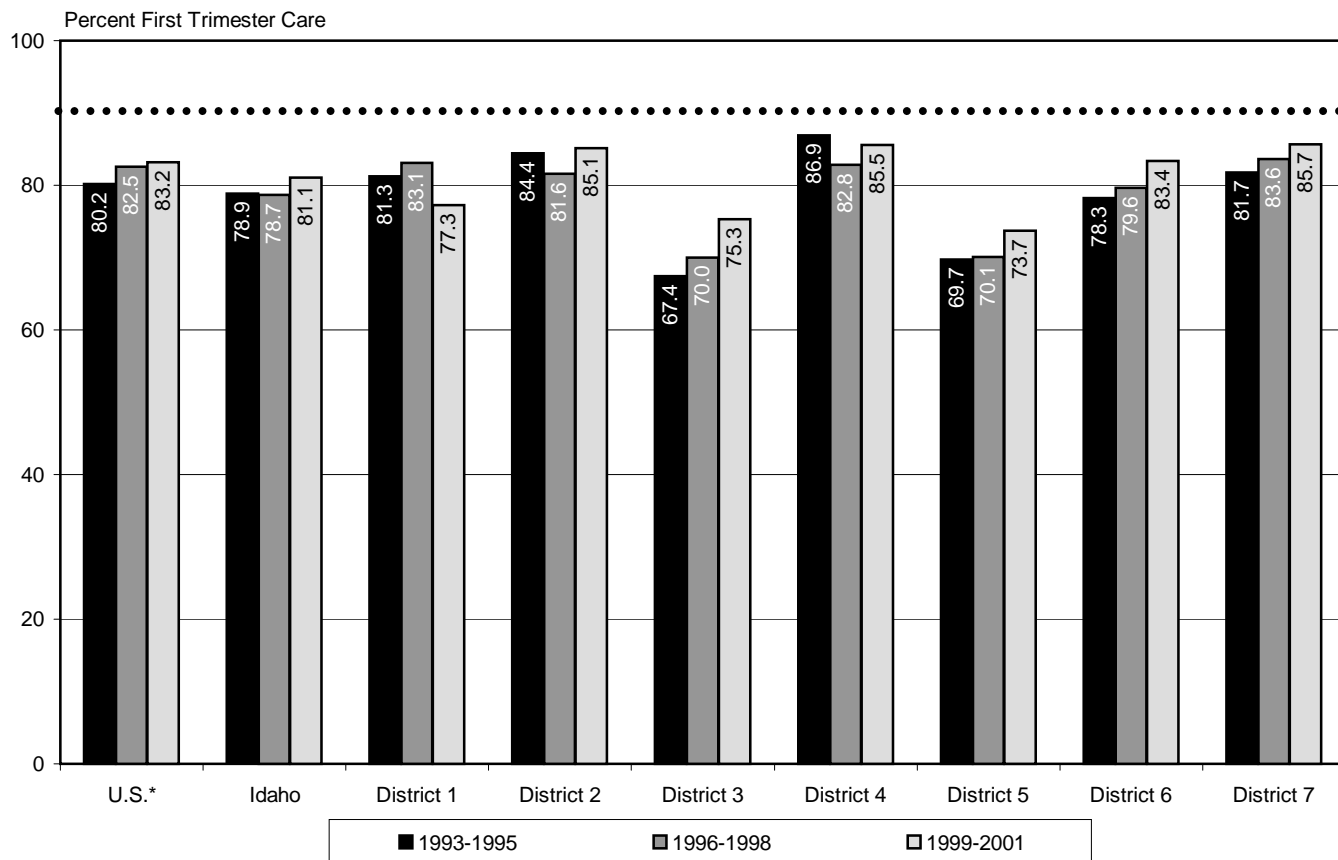
Mortality data in this report are provided by three three-year aggregate time periods: 1993-1995, 1996-1998, and 1999-2001. The numbers of deaths and age-adjusted rates in 1993-1995 and 1996-1998 have been modified by comparability ratios and are comparable with data in 1999-2001. In 1999 there was a major change in the way causes of death are classified and coded. The tenth revision of the International Classification of Diseases (ICD-10) was implemented in the United States, replacing the ninth revision of the ICD (ICD-9), which was used from 1979 through 1998. Mortality statistics based on ICD-10 codes are not directly comparable to mortality statistics based on ICD-9 codes without modification of data based on ICD-9 codes. The year 2001 marked the first year in which three years of data based on ICD-10 were available for analysis. This is the first Idaho report to provide trend data by district of residence and cause of death based on ICD-9 codes and ICD-10 codes. See Technical notes at the end of this report for more information on ICD and comparability ratios.

Birth data are shown for selected maternal characteristics, birth outcomes and for teen pregnancy. Death statistics are provided for the leading causes of deaths to Idahoans. Also shown are Lung, Prostate, Colorectal, and Female breast cancer, which are subsets of Malignant neoplasms, and Motor vehicle accident deaths, which is a subset of Accidents. In addition, the categories of Homicide, Firearm-injury, Alcohol-induced, and Drug-induced deaths are included in the tables. Infant death data are provided for all infant deaths, Congenital malformations (birth defects) and Sudden infant death syndrome (SIDS).

Each table includes two interpretations of the data. The first interpretation is the comparison of the Idaho rate in 1999-2001 with the rate in 1993-1995. Percent of change in the rates and statistical difference or non-difference is noted. The second interpretation is based on district data for 1999-2001. The district with the highest rate is compared with the Idaho rate and rates for all other districts.

U.S. Birth Rates, 1994, 1997, and 2000
and
Idaho and District Resident Births,
Three-Year Numbers and Rates,
1993-1995, 1996-1998, and 1999-2001

**U.S., Idaho and District Resident Live Births
Percent First Trimester Prenatal Care
1993-1995, 1996-1998, and 1999-2001**



*U.S. percent in 1994, 1997, and 2000.

..... U.S. Healthy People 2010 Target

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Total Births	52,955	5,976	3,575	7,981	12,999	7,008	7,691	7,725
	Early Care	40,742	4,830	2,989	5,302	11,150	4,767	5,689	6,015
	Percent ¹	78.9	81.3	84.4	67.4	86.9	69.7	78.3	81.7
	95% CI ²	78.5 - 79.2	80.3 - 82.3	83.2 - 85.6	66.4 - 68.4	86.4 - 87.5	68.6 - 70.8	77.3 - 79.2	80.9 - 82.6
1996-1998	Total Births	56,451	6,356	3,532	8,924	14,634	7,469	7,817	7,719
	Early Care	42,930	5,230	2,830	6,008	11,652	5,099	6,077	6,034
	Percent ¹	78.7	83.1	81.6	70.0	82.8	70.1	79.6	83.6
	95% CI ²	78.4 - 79.1	82.1 - 84.0	80.3 - 82.9	69.0 - 70.9	82.2 - 83.4	69.0 - 71.1	78.7 - 80.5	82.8 - 84.5
1999-2001	Total Births	60,861	6,827	3,385	10,146	16,408	7,743	8,247	8,105
	Early Care	47,532	5,084	2,839	7,316	13,367	5,631	6,571	6,724
	Percent ¹	81.1	77.3	85.1	75.3	85.5	73.7	83.4	85.7
	95% CI ²	80.8 - 81.4	76.3 - 78.3	83.9 - 86.3	74.4 - 76.2	85.0 - 86.1	72.7 - 74.7	82.5 - 84.2	84.9 - 86.4

The Healthy People 2010 target is 90 percent of pregnant women receiving prenatal care in the first trimester.

1. Percents are based on records with known data for prenatal care.

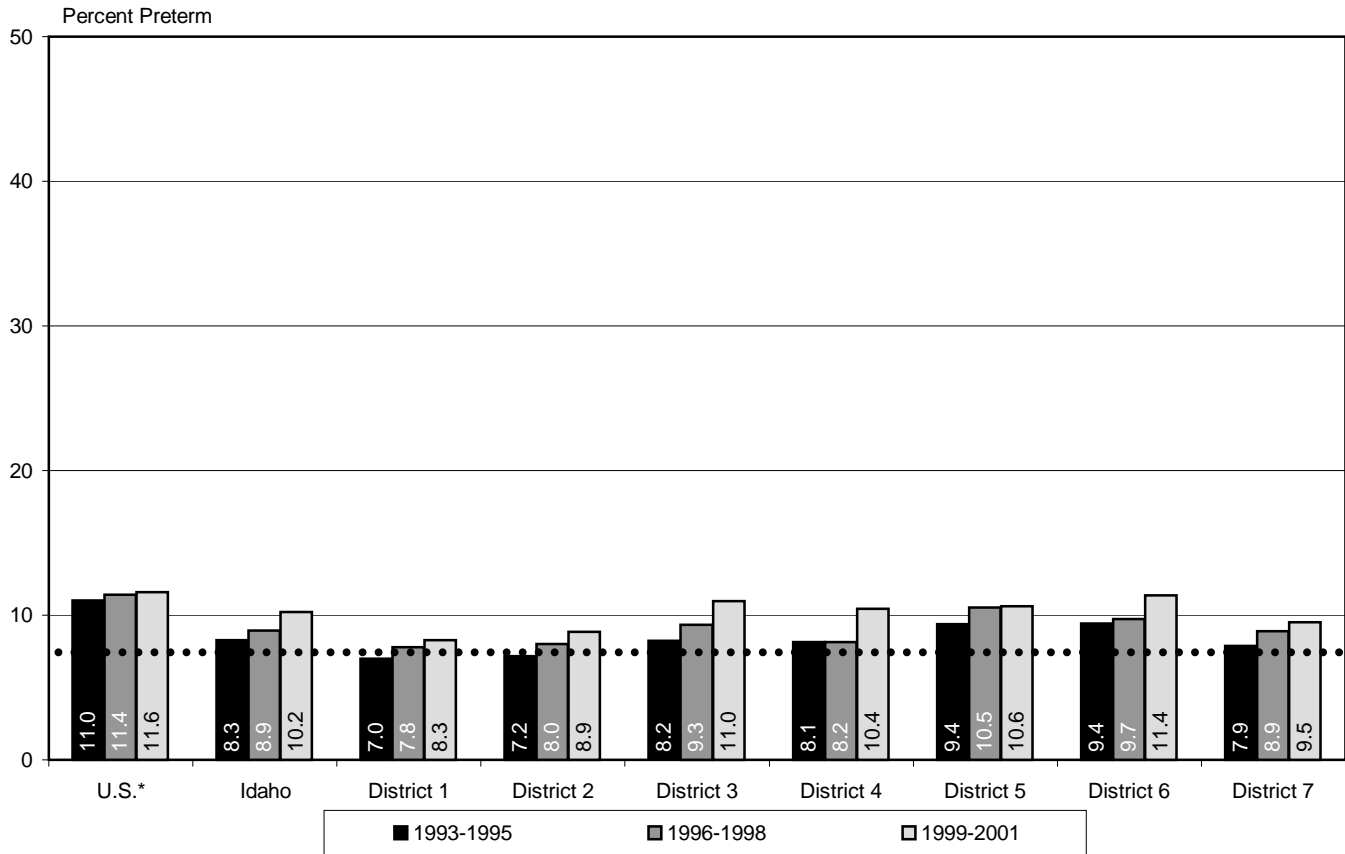
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true percent falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the percents for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the percents are significantly different at the 95-percent level.

Interpretation 1: In Idaho the percent of births to mothers receiving first trimester prenatal care (early care) in 1999-2001 (81.1 percent) was significantly higher than in 1993-1995 (78.9 percent). This was a 2.8% increase in the percent of Idaho mothers receiving early care.

Interpretation 2: In 1999-2001 District 7 (85.7 percent) had the highest percent of births to mothers receiving first trimester prenatal care; District 7 was significantly higher than the state (81.1 percent), as well as District 1 (77.3 percent), District 3 (75.3 percent), District 5 (73.7 percent), and District 6 (83.4 percent).

See Technical notes for methodology.

U.S., Idaho and District Resident Live Births
Percent Preterm Births
1993-1995, 1996-1998, and 1999-2001



*U.S. percent in 1994, 1997, and 2000.

..... U.S. Healthy People 2010 Target

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Total Births	52,955	5,976	3,575	7,981	12,999	7,008	7,691	7,725
	Preterm	4,299	404	253	642	1,055	654	696	595
	Percent ¹	8.3	7.0	7.2	8.2	8.1	9.4	9.4	7.9
	95% CI ²	8.0 - 8.5	6.3 - 7.6	6.3 - 8.0	7.6 - 8.8	7.7 - 8.6	8.7 - 10.1	8.7 - 10.1	7.3 - 8.5
1996-1998	Total Births	56,451	6,356	3,532	8,924	14,634	7,469	7,817	7,719
	Preterm	4,950	472	280	815	1,191	781	753	658
	Percent ¹	8.9	7.8	8.0	9.3	8.2	10.5	9.7	8.9
	95% CI ²	8.7 - 9.2	7.1 - 8.4	7.1 - 8.9	8.7 - 9.9	7.7 - 8.6	9.8 - 11.2	9.1 - 10.4	8.3 - 9.6
1999-2001	Total Births	60,861	6,827	3,385	10,146	16,408	7,743	8,247	8,105
	Preterm	6,181	554	298	1,108	1,705	821	925	770
	Percent ¹	10.2	8.3	8.9	11.0	10.4	10.6	11.4	9.5
	95% CI ²	10.0 - 10.5	7.6 - 8.9	7.9 - 9.8	10.4 - 11.6	10.0 - 10.9	9.9 - 11.3	10.7 - 12.1	8.9 - 10.2

The Healthy People 2010 target is 7.6 percent of live births born preterm (less than 37 weeks of gestation).

1. Percents are based on records with known data for gestation.

2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true percent falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the percents for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the percents are significantly different at the 95-percent level.

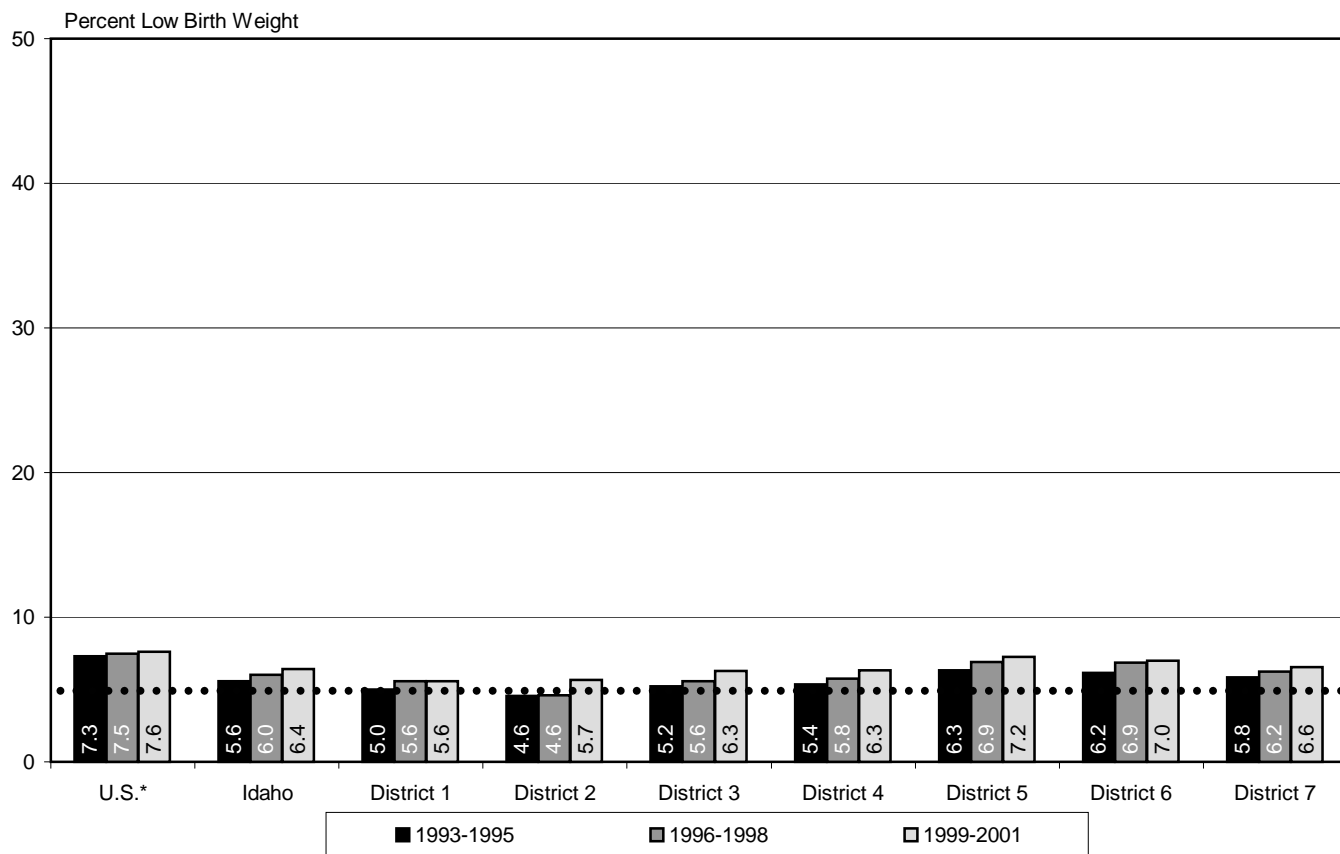
Interpretation 1: In Idaho the percent of preterm births in 1999-2001 (10.2 percent) was significantly higher than in 1993-1995 (8.3 percent).

From 1993-1995 to 1999-2001, there was a 22.9% increase in the percent of preterm births to Idaho mothers.

Interpretation 2: In 1999-2001 the percent of preterm births was highest in District 6 (11.4 percent); District 6 was significantly higher than the state (10.2 percent) as well as District 1 (8.3 percent), District 2 (8.9 percent) and District 7 (9.5 percent).

See Technical notes for methodology.

U.S., Idaho and District Resident Live Births
Percent Low Birth Weight Births
1993-1995, 1996-1998, and 1999-2001



*U.S. percent in 1994, 1997, and 2000.

..... U.S. Healthy People 2010 Target

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Total Births	52,955	5,976	3,575	7,981	12,999	7,008	7,691	7,725
	LBW ¹	2,942	299	163	415	698	444	473	450
	Percent ²	5.6	5.0	4.6	5.2	5.4	6.3	6.2	5.8
	95% CI ³	5.4 - 5.8	4.5 - 5.6	3.9 - 5.2	4.7 - 5.7	5.0 - 5.8	5.8 - 6.9	5.6 - 6.7	5.3 - 6.4
1996-1998	Total Births	56,451	6,356	3,532	8,924	14,634	7,469	7,817	7,719
	LBW ¹	3,385	355	163	496	842	515	536	478
	Percent ²	6.0	5.6	4.6	5.6	5.8	6.9	6.9	6.2
	95% CI ³	5.8 - 6.2	5.0 - 6.2	3.9 - 5.3	5.1 - 6.0	5.4 - 6.1	6.3 - 7.5	6.3 - 7.4	5.7 - 6.8
1999-2001	Total Births	60,861	6,827	3,385	10,146	16,408	7,743	8,247	8,105
	LBW ¹	3,915	381	192	635	1,040	561	575	531
	Percent ²	6.4	5.6	5.7	6.3	6.3	7.2	7.0	6.6
	95% CI ³	6.2 - 6.6	5.0 - 6.1	4.9 - 6.5	5.8 - 6.7	6.0 - 6.7	6.7 - 7.8	6.4 - 7.5	6.0 - 7.1

The Healthy People 2010 target is 5 percent of live births born at low birth weight (less than 2,500 grams).

1. LBW (Low Birth Weight): Babies born weighing less than 2,500 grams

2. Percents are based on records with known data for birth weight.

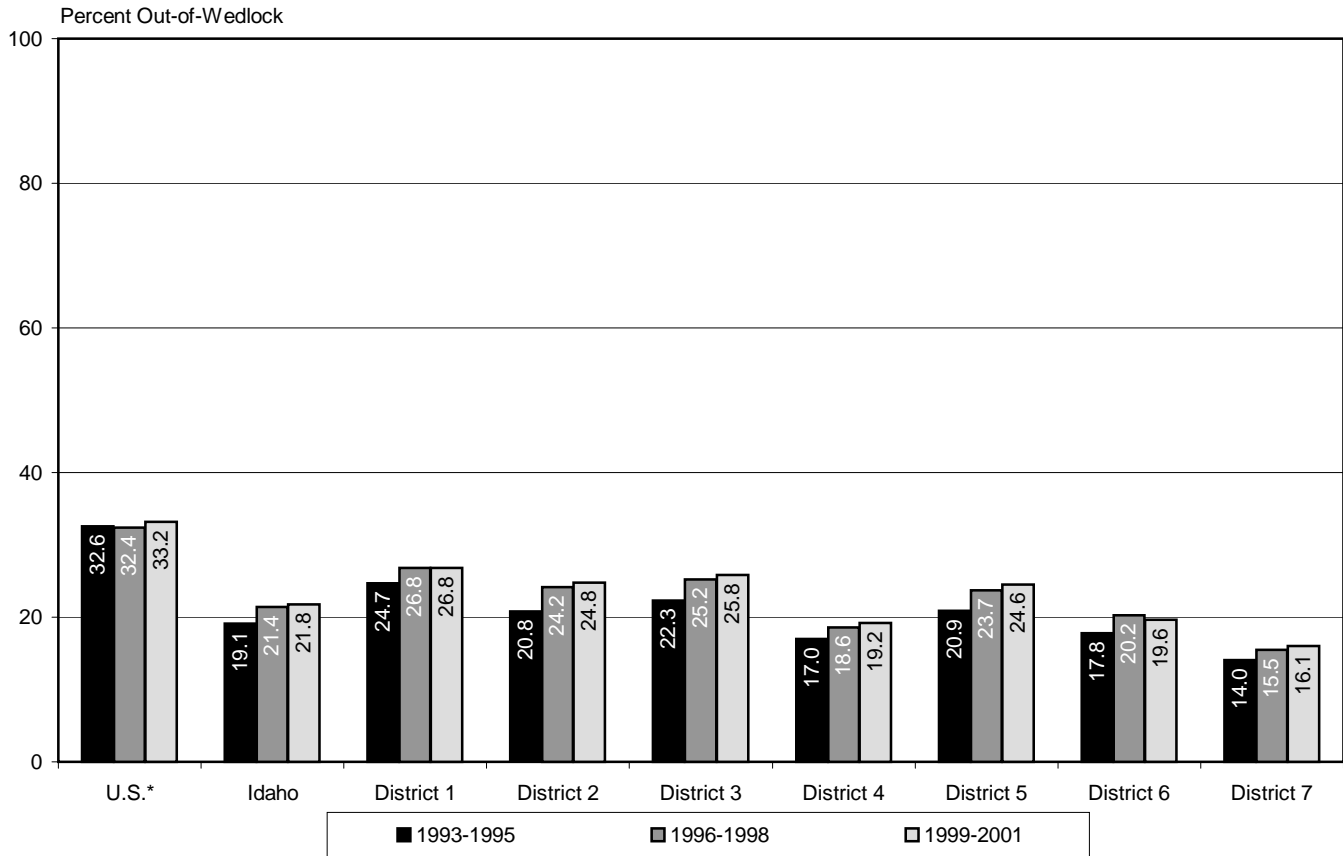
3. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true percent falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the percents for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the percents are significantly different at the 95-percent level.

Interpretation 1: In Idaho the percent of births born weighing less than 2,500 grams in 1999-2001 (6.4 percent) was significantly higher than in 1993-1995 (5.6 percent). From 1993-1995 to 1999-2001, the percent of low birth weight births to Idaho mothers increased 14.3%.

Interpretation 2: In 1999-2001 District 5 had the highest percent of live births weighing less than 2,500 grams (7.2 percent); District 5 was significantly higher than the state (6.4 percent), as well as District 1 (5.6 percent) and District 2 (5.7 percent).

See Technical notes for methodology.

U.S., Idaho and District Resident Live Births
Percent Out-of-Wedlock Births
1993-1995, 1996-1998, and 1999-2001



*U.S. percent in 1994, 1997, and 2000.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Total Births	52,955	5,976	3,575	7,981	12,999	7,008	7,691	7,725
	Unmarried	10,121	1,476	744	1,778	2,206	1,463	1,370	1,084
	Percent ¹	19.1	24.7	20.8	22.3	17.0	20.9	17.8	14.0
	95% CI ²	18.8 - 19.4	23.6 - 25.8	19.5 - 22.1	21.4 - 23.2	16.3 - 17.6	19.9 - 21.8	17.0 - 18.7	13.3 - 14.8
1996-1998	Total Births	56,451	6,356	3,532	8,924	14,634	7,469	7,817	7,719
	Unmarried	12,069	1,703	853	2,249	2,716	1,771	1,581	1,196
	Percent ¹	21.4	26.8	24.2	25.2	18.6	23.7	20.2	15.5
	95% CI ²	21.0 - 21.7	25.7 - 27.9	22.7 - 25.6	24.3 - 26.1	17.9 - 19.2	22.7 - 24.7	19.3 - 21.1	14.7 - 16.3
1999-2001	Total Births	60,861	6,827	3,385	10,146	16,408	7,743	8,247	8,105
	Unmarried	13,256	1,830	838	2,619	3,148	1,901	1,619	1,301
	Percent ¹	21.8	26.8	24.8	25.8	19.2	24.6	19.6	16.1
	95% CI ²	21.5 - 22.1	25.8 - 27.9	23.3 - 26.2	25.0 - 26.7	18.6 - 19.8	23.6 - 25.5	18.8 - 20.5	15.3 - 16.9

1. Percents are based on records with known marital status.

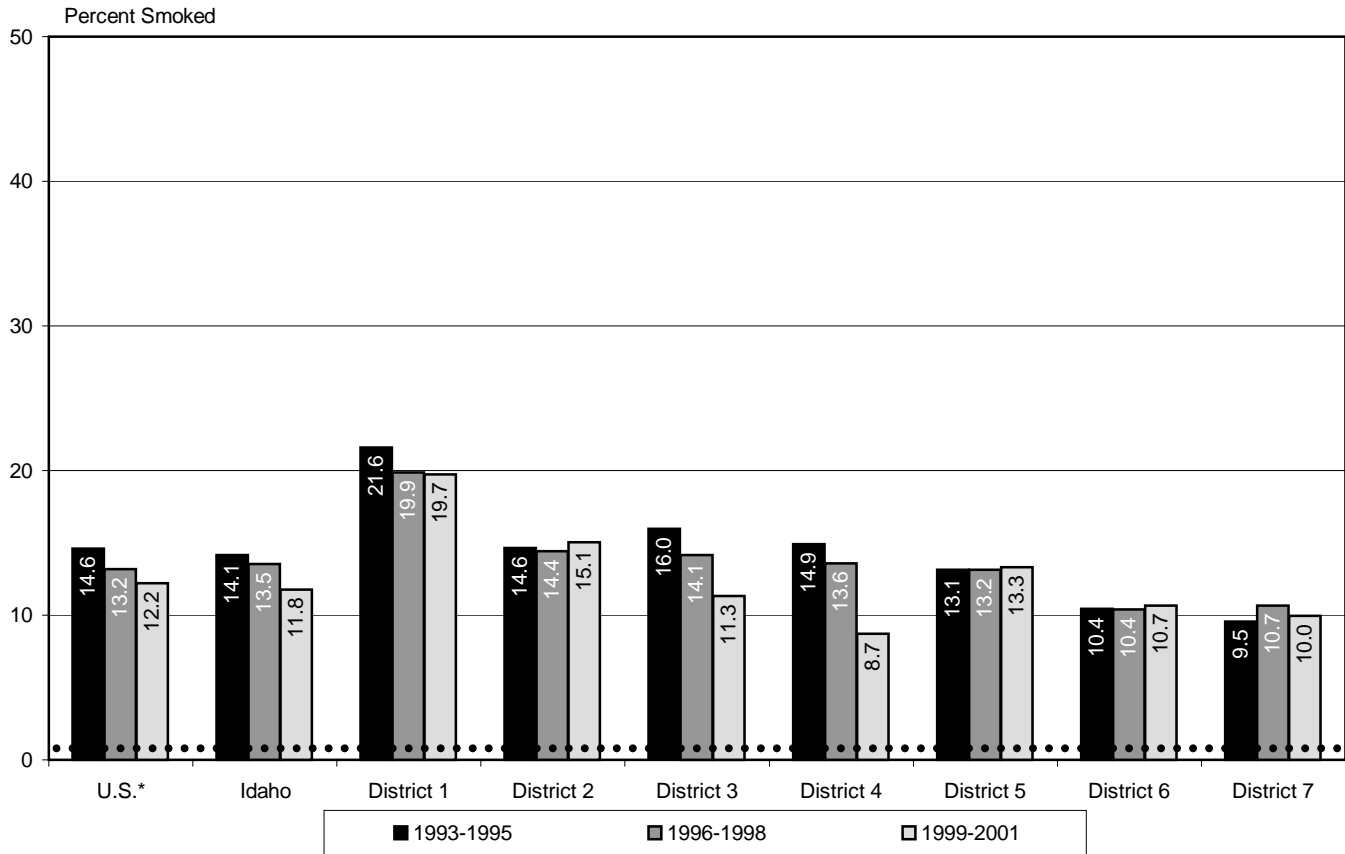
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true percent falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the percents for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the percents are significantly different at the 95-percent level.

Interpretation 1: In Idaho the percent of births to unmarried mothers in 1999-2001 (21.8 percent) was significantly higher than in 1993-1995 (19.1 percent). There was a 14.1% increase in births to unmarried mothers from 1993-1995 to 1999-2001.

Interpretation 2: In 1999-2001 the percent of births to unmarried mothers was highest in District 1 (26.8 percent); District 1 was significantly higher than the state (21.8 percent), as well as District 4 (19.2 percent), District 5 (24.6 percent), District 6 (19.6 percent), and District 7 (16.1 percent).

See Technical notes for methodology.

U.S., Idaho and District Resident Live Births
Percent Mothers Who Smoked During Pregnancy
1993-1995, 1996-1998, and 1999-2001



*U.S. percent in 1994, 1997, and 2000.

..... U.S. Healthy People 2010 Target

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Total Births	52,955	5,976	3,575	7,981	12,999	7,008	7,691	7,725
	Smoked	7,458	1,289	520	1,266	1,929	916	802	736
	Percent ¹	14.1	21.6	14.6	16.0	14.9	13.1	10.4	9.5
	95% CI ²	13.8 - 14.4	20.6 - 22.7	13.5 - 15.8	15.2 - 16.8	14.3 - 15.5	12.3 - 13.9	9.8 - 11.1	8.9 - 10.2
1996-1998	Total Births	56,451	6,356	3,532	8,924	14,634	7,469	7,817	7,719
	Smoked	7,533	1,260	507	1,243	1,921	974	809	819
	Percent ¹	13.5	19.9	14.4	14.1	13.6	13.2	10.4	10.7
	95% CI ²	13.3 - 13.8	18.9 - 20.9	13.3 - 15.6	13.4 - 14.9	13.0 - 14.1	12.4 - 13.9	9.7 - 11.1	10.0 - 11.4
1999-2001	Total Births	60,861	6,827	3,385	10,146	16,408	7,743	8,247	8,105
	Smoked	7,118	1,339	508	1,137	1,431	1,027	871	805
	Percent ¹	11.8	19.7	15.1	11.3	8.7	13.3	10.7	10.0
	95% CI ²	11.5 - 12.0	18.8 - 20.7	13.8 - 16.3	10.7 - 11.9	8.3 - 9.2	12.6 - 14.1	10.0 - 11.3	9.3 - 10.6

The Healthy People 2010 target is 99 percent abstinence from smoking by pregnant women.

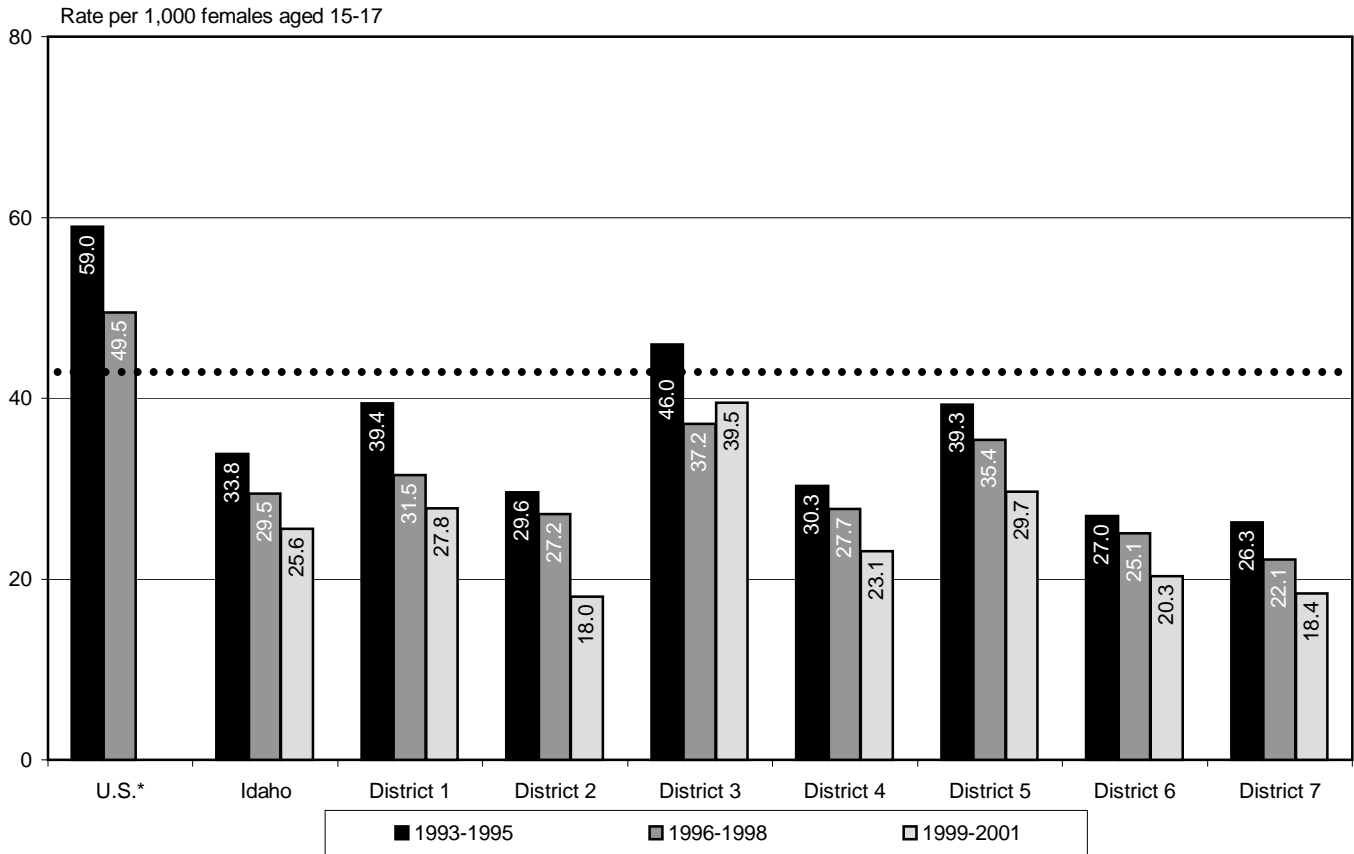
1. Percents are based on records with known data for tobacco use.
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true percent falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the percents for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the percents are significantly different at the 95-percent level.

Interpretation 1: In Idaho the percent of mothers who smoked during pregnancy in 1999-2001 (11.8 percent) was significantly lower than in 1993-1995 (14.1 percent). This represents a 16.3% decrease in the percent of mother's who smoked during pregnancy.

Interpretation 2: In 1999-2001 the percent of mothers who smoked during pregnancy was the highest in District 1 (19.7 percent); District 1 was significantly higher than all other Districts.

See Technical notes for methodology.

**U.S., Idaho and District Resident Teen Pregnancy
Teen Pregnancy Rate, Teens Aged 15-17
1993-1995, 1996-1998, and 1999-2001**



*U.S. rate in 1994 and 1997 (the latest year available is 1997).

..... U.S. Healthy People 2010 Target

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Pregnancies	2,982	434	188	592	593	472	364	339
	Rate ¹	33.8	39.4	29.6	46.0	30.3	39.3	27.0	26.3
	95% CI ²	33.3 - 34.4	37.8 - 41.0	27.7 - 31.6	44.5 - 47.5	29.2 - 31.4	37.8 - 40.8	25.7 - 28.3	25.0 - 27.6
1996-1998	Pregnancies	2,832	390	179	542	611	457	355	298
	Rate ¹	29.5	31.5	27.2	37.2	27.7	35.4	25.1	22.1
	95% CI ²	29.0 - 30.0	30.1 - 32.9	25.3 - 29.1	35.8 - 38.5	26.7 - 28.7	34.0 - 36.8	23.9 - 26.3	20.9 - 23.4
1999-2001	Pregnancies	2,448	349	116	550	529	379	278	247
	Rate ¹	25.6	27.8	18.0	39.5	23.1	29.7	20.3	18.4
	95% CI ²	25.1 - 26.1	26.5 - 29.2	16.4 - 19.7	38.1 - 40.9	22.1 - 24.0	28.3 - 31.1	19.1 - 21.5	17.3 - 19.6

The Healthy People 2010 target is 43 pregnancies per 1,000 females aged 15-17.

1. Rate: Total number of pregnancies per 1,000 females aged 15-17.

2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true pregnancy rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

Interpretation 1: In Idaho the pregnancy rate for teens aged 15-17 in 1999-2001 (25.6) was significantly lower than in 1993-1995 (33.8).

The teen pregnancy rate decreased 24.3% from 1993-1995 to 1999-2001.

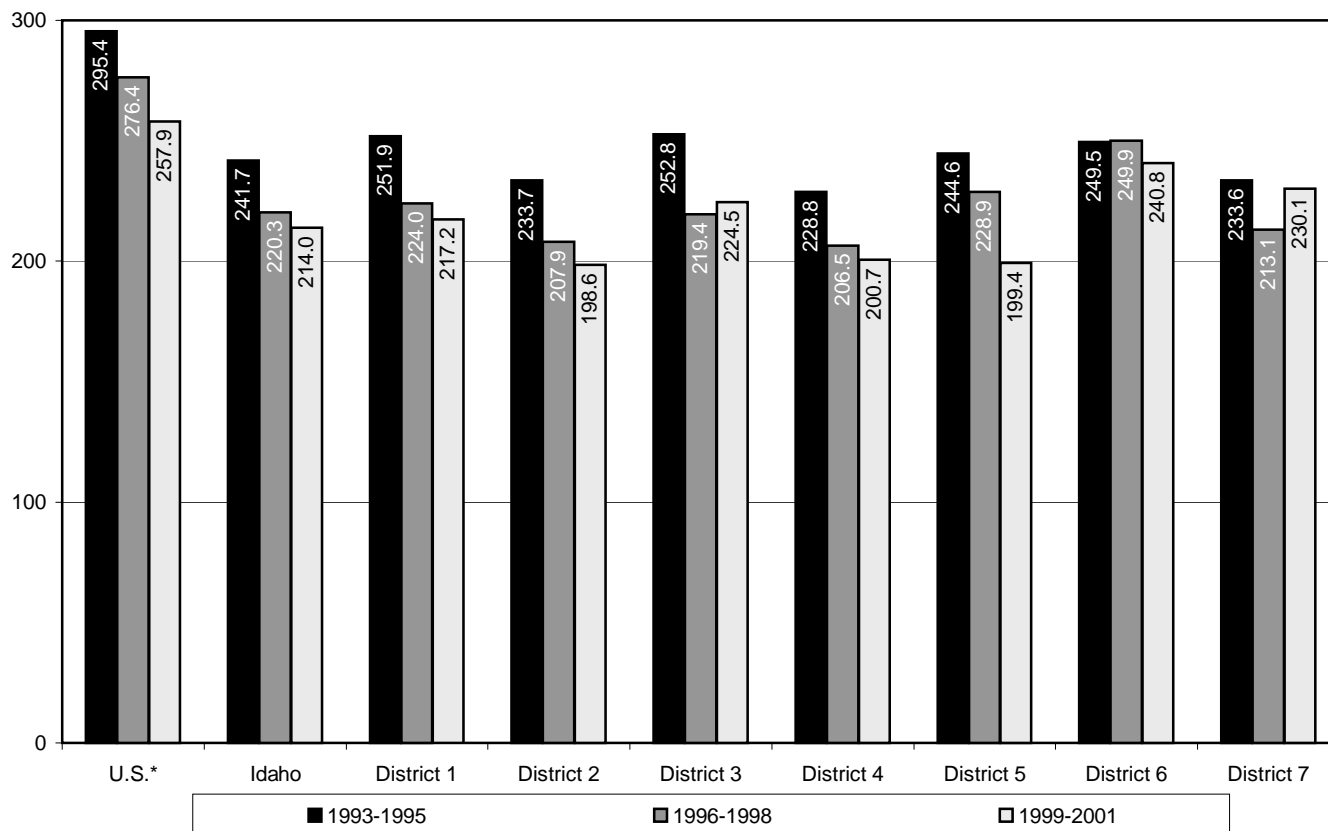
Interpretation 2: In 1999-2001 the pregnancy rate for teens aged 15-17 was significantly higher in District 3 (39.5) than all other Districts.

See Technical notes for methodology.

U.S. Age-Adjusted Rates, 1994, 1997, and 2000
and
Idaho and District Resident Deaths,
Three-Year Numbers and Average Annual Age-Adjusted Rates,
1993-1995, 1996-1998, and 1999-2001

U.S., Idaho and District Resident Deaths
Diseases of Heart
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 population



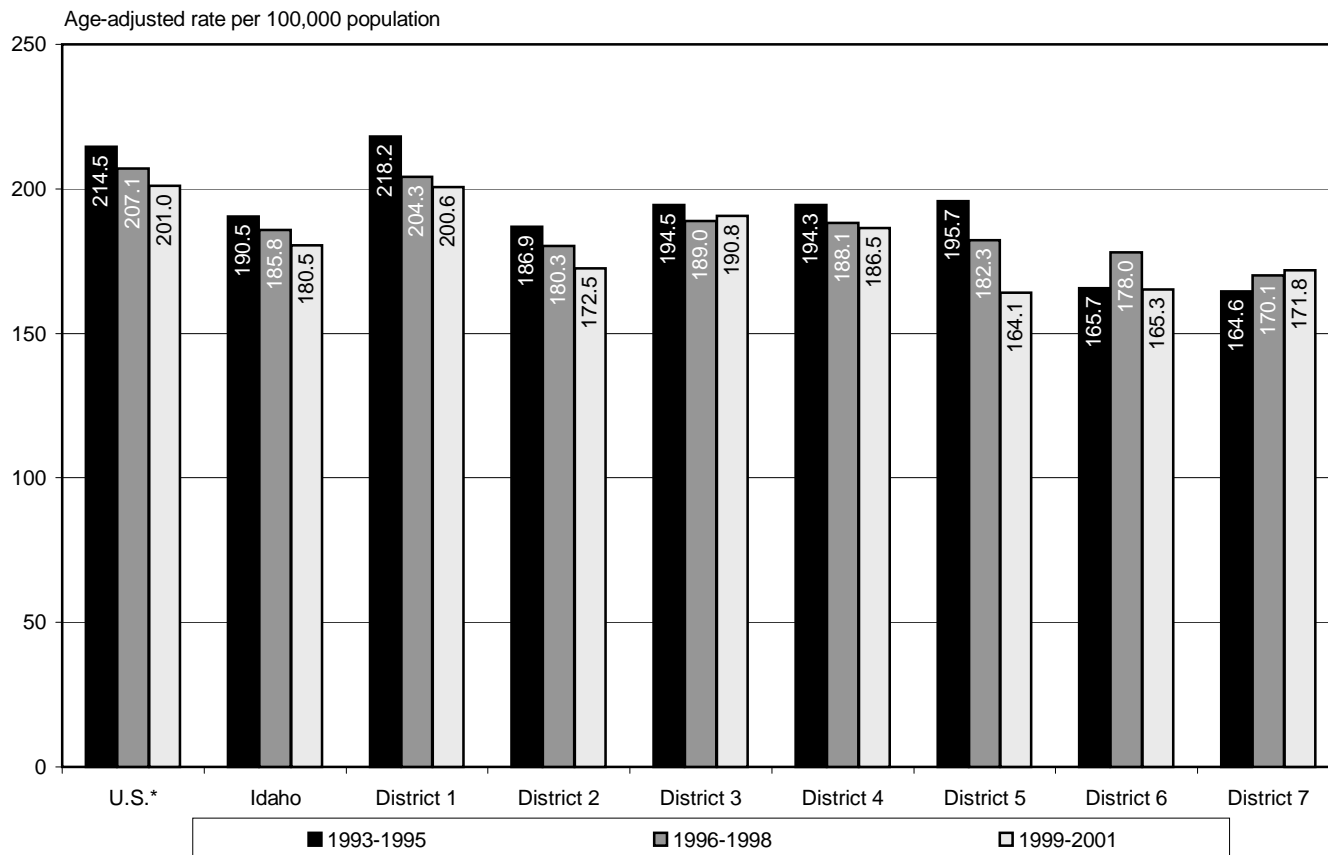
*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	7,167	1,103	715	1,241	1,413	1,048	906	741
	Rate ¹	241.7	251.9	233.7	252.8	228.8	244.6	249.5	233.6
	95% CI ²	236.2 - 247.3	237.1 - 266.8	216.7 - 250.7	238.8 - 266.8	216.9 - 240.7	229.9 - 259.4	233.3 - 265.7	216.7 - 250.4
1996-1998	Deaths ¹	7,155	1,094	685	1,169	1,427	1,052	985	742
	Rate ¹	220.3	224.0	207.9	219.4	206.5	228.9	249.9	213.1
	95% CI ²	215.3 - 225.4	210.7 - 237.2	192.5 - 223.4	206.9 - 231.9	195.8 - 217.1	215.1 - 242.6	234.4 - 265.4	197.9 - 228.4
1999-2001	Deaths ¹	7,516	1,179	685	1,264	1,545	1,013	985	845
	Rate ¹	214.0	217.2	198.6	224.5	200.7	199.4	240.8	230.1
	95% CI ²	209.1 - 218.8	204.8 - 229.7	184.1 - 213.1	212.2 - 236.9	190.7 - 210.8	187.1 - 211.7	225.8 - 255.9	214.5 - 245.7

There is no Healthy People 2010 target for Diseases of heart.

- Total number of deaths and average annual age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 - 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
- Interpretation 1: In 1999-2001 the age-adjusted death rate for Idaho (214.0) was significantly lower than the Idaho rate in 1993-1995 (241.7). The age-adjusted rate for Diseases of the heart deaths to Idahoans decreased 11.5% from 1993-1995 to 1999-2001.
- Interpretation 2: In 1999-2001, District 6 had the highest rate (240.8); the rate for District 6 was significantly higher than the rate for Idaho (214.0), District 2 (198.6), District 4 (200.7), and District 5 (199.4).
- Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Diseases of heart is 0.9858. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Malignant Neoplasms (Cancer) Deaths
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

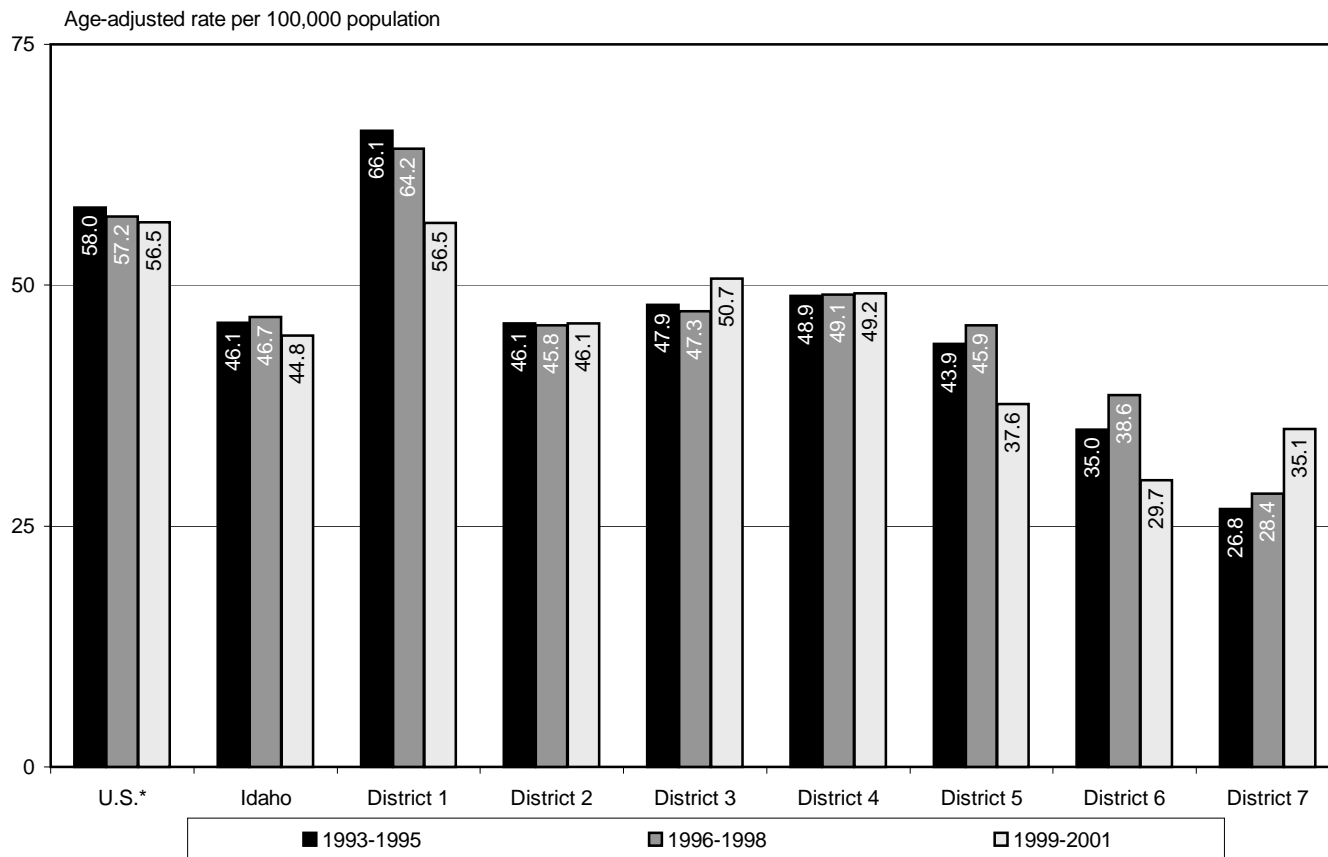
		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	5,826	1,007	561	950	1,260	860	630	559
	Rate ¹	190.5	218.2	186.9	194.5	194.3	195.7	165.7	164.6
	95% CI ²	185.6 - 195.4	204.6 - 231.8	171.3 - 202.5	182.1 - 207	183.5 - 205.2	182.5 - 208.9	152.7 - 178.7	150.8 - 178.4
1996-1998	Deaths ¹	6,123	1,035	573	986	1,350	848	712	620
	Rate ¹	185.8	204.3	180.3	189.0	188.1	182.3	178.0	170.1
	95% CI ²	181.1 - 190.5	191.8 - 216.8	165.4 - 195.1	177.1 - 200.8	178 - 198.2	170.0 - 194.7	164.9 - 191.1	156.6 - 183.6
1999-2001	Deaths ¹	6,386	1,119	575	1,050	1,481	817	682	662
	Rate ¹	180.5	200.6	172.5	190.8	186.5	164.1	165.3	171.8
	95% CI ²	176.0 - 184.9	188.8 - 212.4	159.3 - 185.8	179.2 - 202.3	176.9 - 196.0	152.9 - 175.4	152.9 - 177.7	158.7 - 185.0

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

- Total number of deaths and average annual age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 - 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
- Interpretation 1: From 1993-1995 to 1999-2001, the cancer death rate decreased 5.2% among Idahoans. There was a significant difference in the Idaho rate in 1999-2001 (180.5) from the rate in 1993-1995 (191.1).
- Interpretation 2: In 1999-2001, District 1 had the highest rate (200.6); the rate for District 1 was significantly higher than the rate for Idaho (180.5), District 2 (172.5), District 5 (164.1), District 6 (165.3) and District 7 (171.8).

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Malignant neoplasms is 1.0068. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Malignant Neoplasms of Trachea, Bronchus and Lung
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

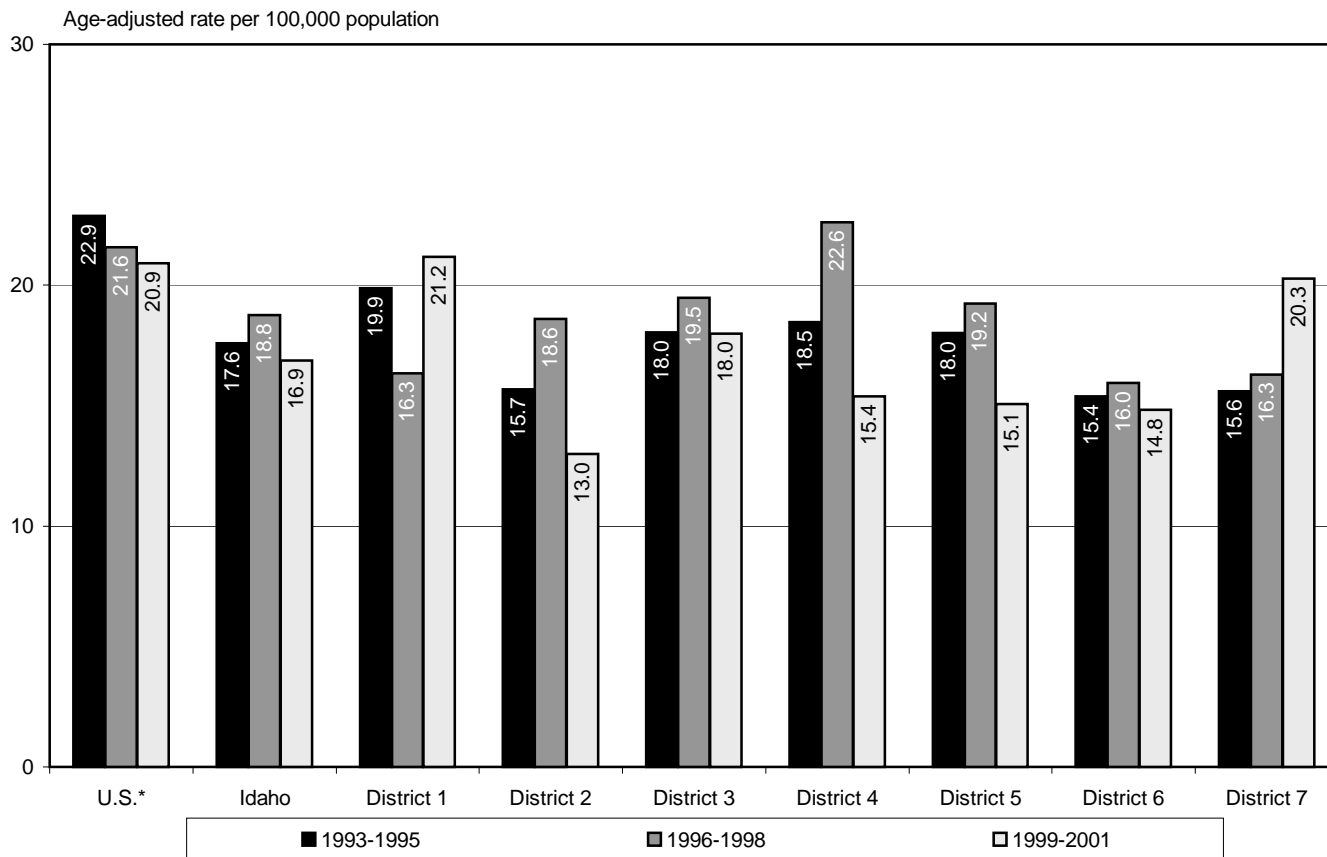
		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	1,425	313	139	234	318	197	133	92
	Rate ¹	46.1	66.1	46.1	47.9	48.9	43.9	35.0	26.8
	95% CI ²	43.7 - 48.5	58.8 - 73.3	38.5 - 53.7	41.8 - 54.0	43.5 - 54.2	37.8 - 50.0	29.1 - 41.0	21.3 - 32.2
1996-1998	Deaths ¹	1,541	329	144	245	349	214	155	105
	Rate ¹	46.7	64.2	45.8	47.3	49.1	45.9	38.6	28.4
	95% CI ²	44.4 - 49.0	57.3 - 71.1	38.4 - 53.3	41.4 - 53.1	43.9 - 54.2	39.8 - 51.9	32.6 - 44.6	23.0 - 33.8
1999-2001	Deaths ¹	1,579	317	153	278	386	187	122	136
	Rate ¹	44.8	56.5	46.1	50.7	49.2	37.6	29.7	35.1
	95% CI ²	42.6 - 47.0	50.2 - 62.7	39.0 - 53.1	44.7 - 56.7	44.2 - 54.1	32.2 - 43.0	24.5 - 35.0	29.2 - 41.0

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

- Total number of deaths and average annual age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 - 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
- Interpretation 1: The Idaho rate declined 2.8%, but did not change significantly from 46.1 in 1993-1995 to 44.8 in 1999-2001.
- Interpretation 2: In 1999-2001, District 1 had the highest rate (56.5); the rate for District 1 was significantly higher than the rate for Idaho (44.8), District 5 (37.6), District 6 (29.7), and District 7 (35.1).

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Lung cancer is 0.9837. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Colorectal Cancer
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	533	90	48	88	117	78	58	54
	Rate ¹	17.6	19.9	15.7	18.0	18.5	18.0	15.4	15.6
	95% CI ²	16.1 - 19.1	16.0 - 24.5	11.6 - 20.8	14.5 - 22.2	15.1 - 21.8	14.2 - 22.5	11.7 - 19.9	11.7 - 20.4
1996-1998	Deaths ¹	615	82	60	103	159	89	63	59
	Rate ¹	18.8	16.3	18.6	19.5	22.6	19.2	16.0	16.3
	95% CI ²	17.3 - 20.2	13.0 - 20.3	14.2 - 24	15.7 - 23.2	19.1 - 26.1	15.5 - 23.7	12.3 - 20.4	12.4 - 21.0
1999-2001	Deaths ¹	594	117	44	100	120	76	61	76
	Rate ¹	16.9	21.2	13.0	18.0	15.4	15.1	14.8	20.3
	95% CI ²	15.5 - 18.2	17.3 - 25.0	9.7 - 17.1	14.5 - 21.5	12.6 - 18.2	11.9 - 18.9	11.3 - 19.0	16.0 - 25.4

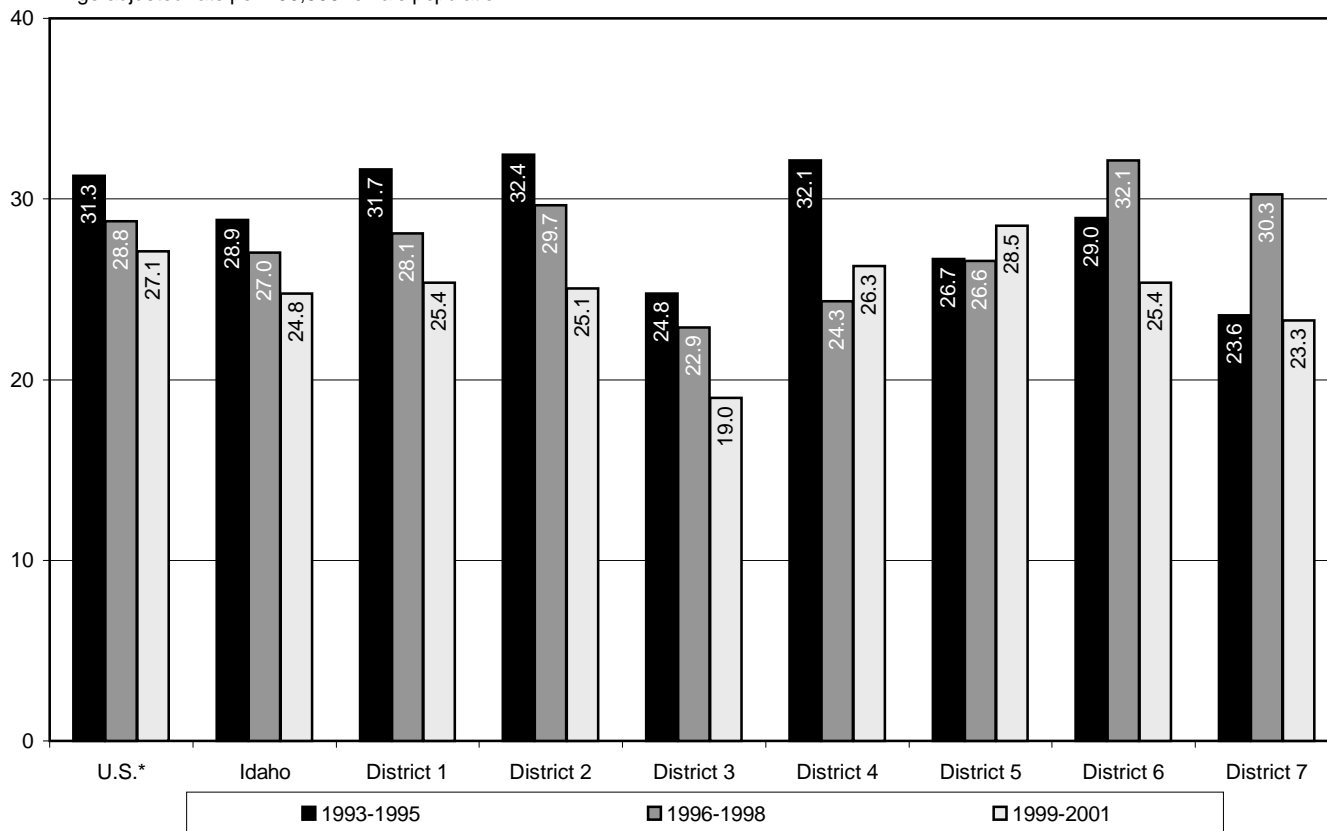
The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

1. Total number of deaths and average annual age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
- Interpretation 1: The Idaho rate declined 4.0%, but did not change significantly from 17.6 in 1993-1995 to 16.9 in 1999-2001.
- Interpretation 2: In 1999-2001, District 1 had the highest rate (21.2); the rate for District 1 did not differ significantly from the Idaho rate, but was significantly higher than the rate for District 2 (13.0).

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Colon cancer is 0.9993. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Female Breast Cancer
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 female population



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	475	77	51	62	120	62	58	43
	Rate ¹	28.9	31.7	32.4	24.8	32.1	26.7	29.0	23.6
	95% CI ²	26.2 - 31.5	25.0 - 39.6	24.1 - 42.8	18.9 - 31.9	26.3 - 37.9	20.4 - 34.3	22.0 - 37.4	17.1 - 31.8
1996-1998	Deaths ¹	484	76	48	63	100	67	69	59
	Rate ¹	27.0	28.1	29.7	22.9	24.3	26.6	32.1	30.3
	95% CI ²	24.6 - 29.5	22.1 - 35.1	21.8 - 39.5	17.5 - 29.3	19.8 - 29.6	20.5 - 33.8	25.0 - 40.7	23.0 - 39.0
1999-2001	Deaths ¹	477	77	46	57	119	73	56	49
	Rate ¹	24.8	25.4	25.1	19.0	26.3	28.5	25.4	23.3
	95% CI ²	22.5 - 27.0	20.0 - 31.7	18.8 - 32.8	14.4 - 24.7	21.5 - 31.0	22.3 - 35.9	19.2 - 32.9	17.2 - 30.8

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

1. Total number of deaths and average annual age-adjusted death rate per 100,000 female population. Rates are standardized to the year 2000 U.S. Standard Population.
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

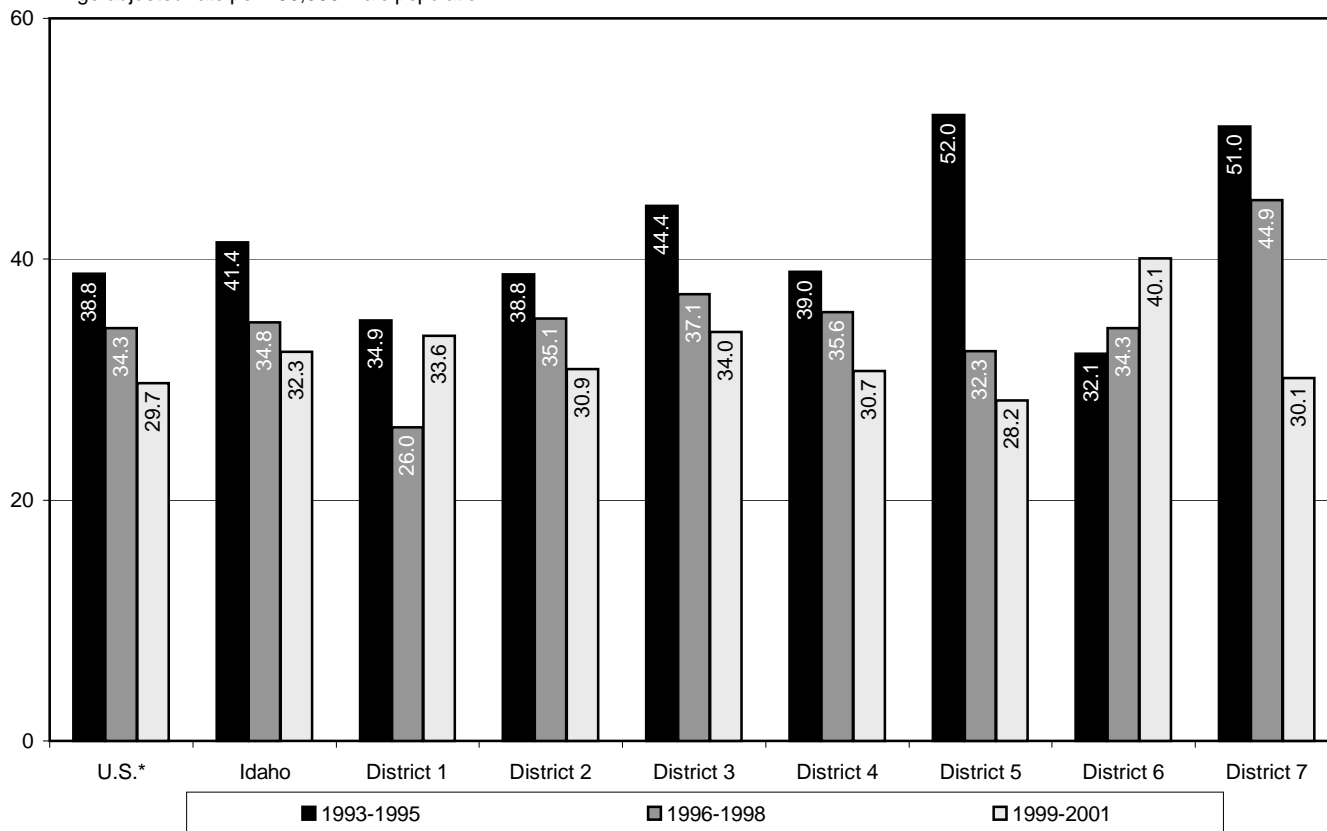
Interpretation 1: The Idaho female breast cancer death rate declined 14.2% from 1993-1995 to 1999-2001. There was not a significant difference in the rates for two time periods.

Interpretation 2: In 1999-2001, District 5 had the highest rate (28.5) among the districts; the rate for District 5 did not differ significantly from the Idaho rate, or the rate for any other district.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Breast cancer is 1.0056. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Prostate Cancer
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 male population



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	502	67	48	92	88	94	50	63
	Rate ¹	41.4	34.9	38.8	44.4	39.0	52.0	32.1	51.0
	95% CI ²	37.7 - 45.1	26.8 - 44.8	28.4 - 51.7	35.7 - 54.7	30.9 - 48.4	41.7 - 63.9	23.6 - 42.7	38.8 - 66.0
1996-1998	Deaths ¹	454	53	47	82	94	60	56	63
	Rate ¹	34.8	26.0	35.1	37.1	35.6	32.3	34.3	44.9
	95% CI ²	31.5 - 38.0	19.3 - 34.3	25.7 - 46.8	29.4 - 46.2	28.6 - 43.8	24.5 - 41.9	25.8 - 44.8	34.3 - 57.8
1999-2001	Deaths ¹	454	74	44	78	89	60	66	43
	Rate ¹	32.3	33.6	30.9	34.0	30.7	28.2	40.1	30.1
	95% CI ²	29.3 - 35.3	26.3 - 42.4	22.4 - 41.6	26.8 - 42.5	24.6 - 37.9	21.6 - 36.4	30.9 - 51.1	21.6 - 40.9

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

1. Total number of deaths and average annual age-adjusted death rate per 100,000 male population. Rates are standardized to the year 2000 U.S. Standard Population.
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

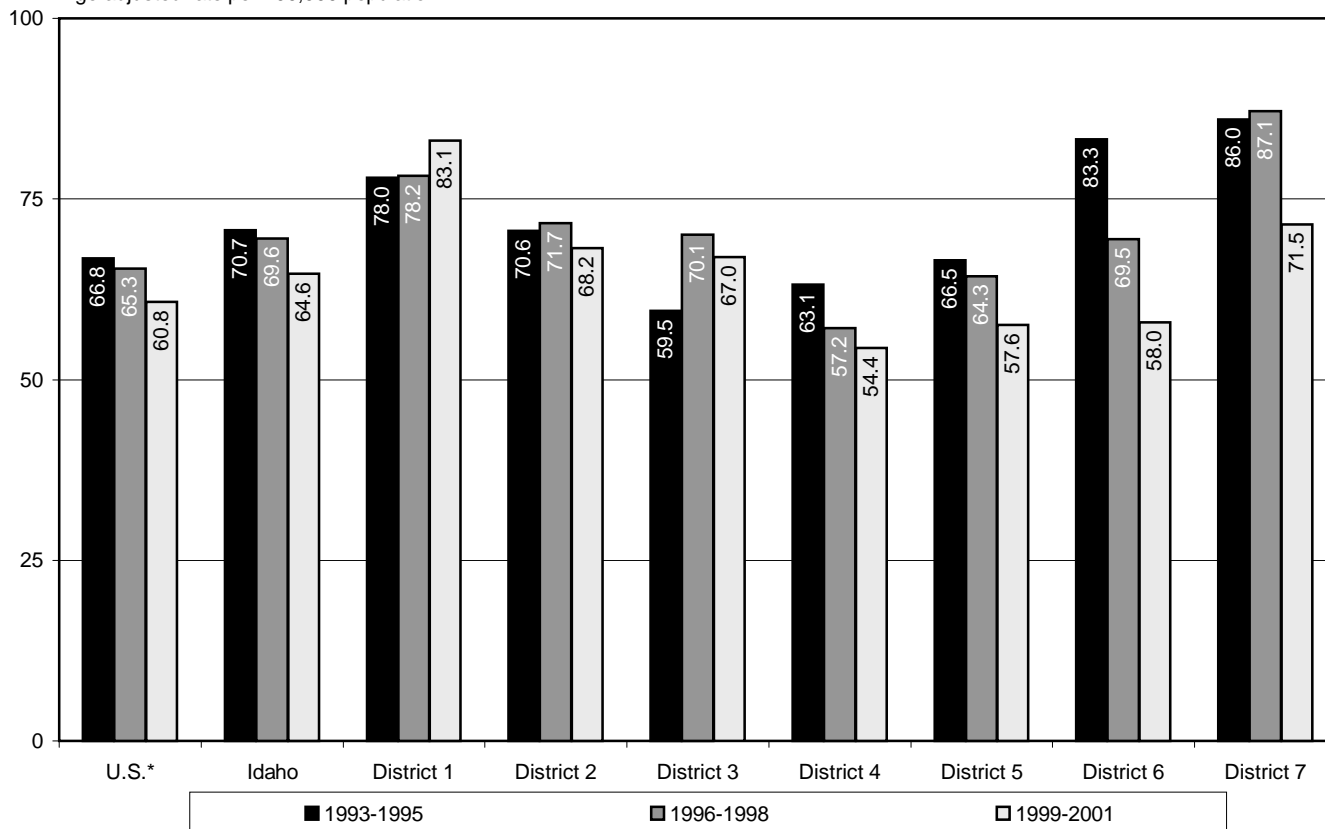
Interpretation 1: The Prostate cancer death rate declined 22.0% from 1993-1995 to 1999-2001. There was a significant difference in the rates from 41.4 in 1993-1995 to 32.3 in 1999-2001.

Interpretation 2: In 1999-2001, District 6 had the highest rate (40.1); the rate for District 6 did not differ significantly from the rate for the state or the rate for any other district.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Prostate cancer is 1.1034. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Cerebrovascular Disease (Stroke)
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 population



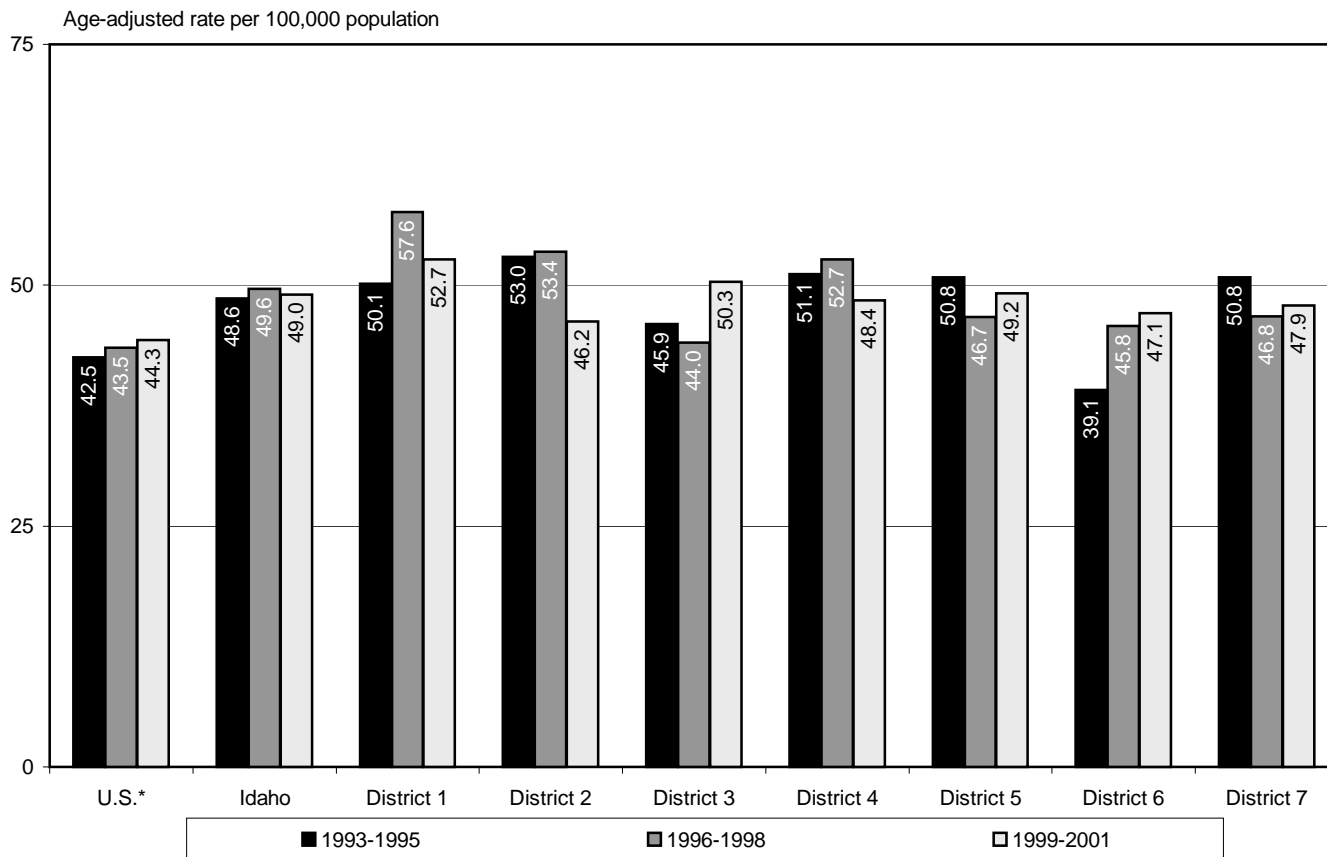
*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	2,064	328	217	294	379	282	298	266
	Rate ¹	70.7	78.0	70.6	59.5	63.1	66.5	83.3	86.0
	95% CI ²	67.5 - 73.8	69.2 - 86.7	60.9 - 80.2	52.5 - 66.5	56.6 - 69.7	58.5 - 74.5	73.5 - 93.1	75.3 - 96.7
1996-1998	Deaths ¹	2,245	374	241	376	394	294	272	293
	Rate ¹	69.6	78.2	71.7	70.1	57.2	64.3	69.5	87.1
	95% CI ²	66.6 - 72.5	70.1 - 86.4	62.3 - 81.0	62.8 - 77.4	51.3 - 63.0	56.8 - 71.9	61.0 - 78.0	76.9 - 97.4
1999-2001	Deaths ¹	2,259	441	237	383	412	295	236	255
	Rate ¹	64.6	83.1	68.2	67.0	54.4	57.6	58.0	71.5
	95% CI ²	62.0 - 67.3	75.3 - 90.8	59.5 - 76.8	60.2 - 73.7	49.1 - 59.7	51.0 - 64.1	50.6 - 65.4	62.7 - 80.3

There is no current Healthy People 2010 target for this Cerebrovascular disease.

- Total number of deaths and average annual age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 - 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
Interpretation 1: The Idaho rate decreased 8.6% and was significantly lower in 1999-2001 (64.6) than in 1993-1995 (70.7).
Interpretation 2: In 1999-2001, District 1 had the highest rate (83.1); the rate for District 1 was significantly higher than the rate for Idaho (64.4), District 3 (67.0), District 4 (54.4), District 5 (57.6) and District 6 (58.0).
- Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Cerebrovascular disease is 1.0588. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Chronic Lower Respiratory Diseases
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	1,478	225	162	229	322	224	147	169
	Rate ¹	48.6	50.1	53.0	45.9	51.1	50.8	39.1	50.8
	95% CI ²	46.1 - 51.2	43.4 - 56.9	44.6 - 61.3	39.8 - 52.0	45.4 - 56.9	44 - 57.6	32.6 - 45.6	42.9 - 58.7
1996-1998	Deaths ¹	1,622	286	173	233	364	218	182	167
	Rate ¹	49.6	57.6	53.4	44.0	52.7	46.7	45.8	46.8
	95% CI ²	47.2 - 52.1	50.8 - 64.5	45.3 - 61.6	38.2 - 49.8	47.1 - 58.2	40.3 - 53.0	39.0 - 52.6	39.5 - 54.1
1999-2001	Deaths ¹	1,715	285	159	281	369	249	193	179
	Rate ¹	49.0	52.7	46.2	50.3	48.4	49.2	47.1	47.9
	95% CI ²	46.7 - 51.4	46.5 - 58.8	39.0 - 53.4	44.5 - 56.2	43.5 - 53.4	43.1 - 55.3	40.5 - 53.8	40.8 - 54.9

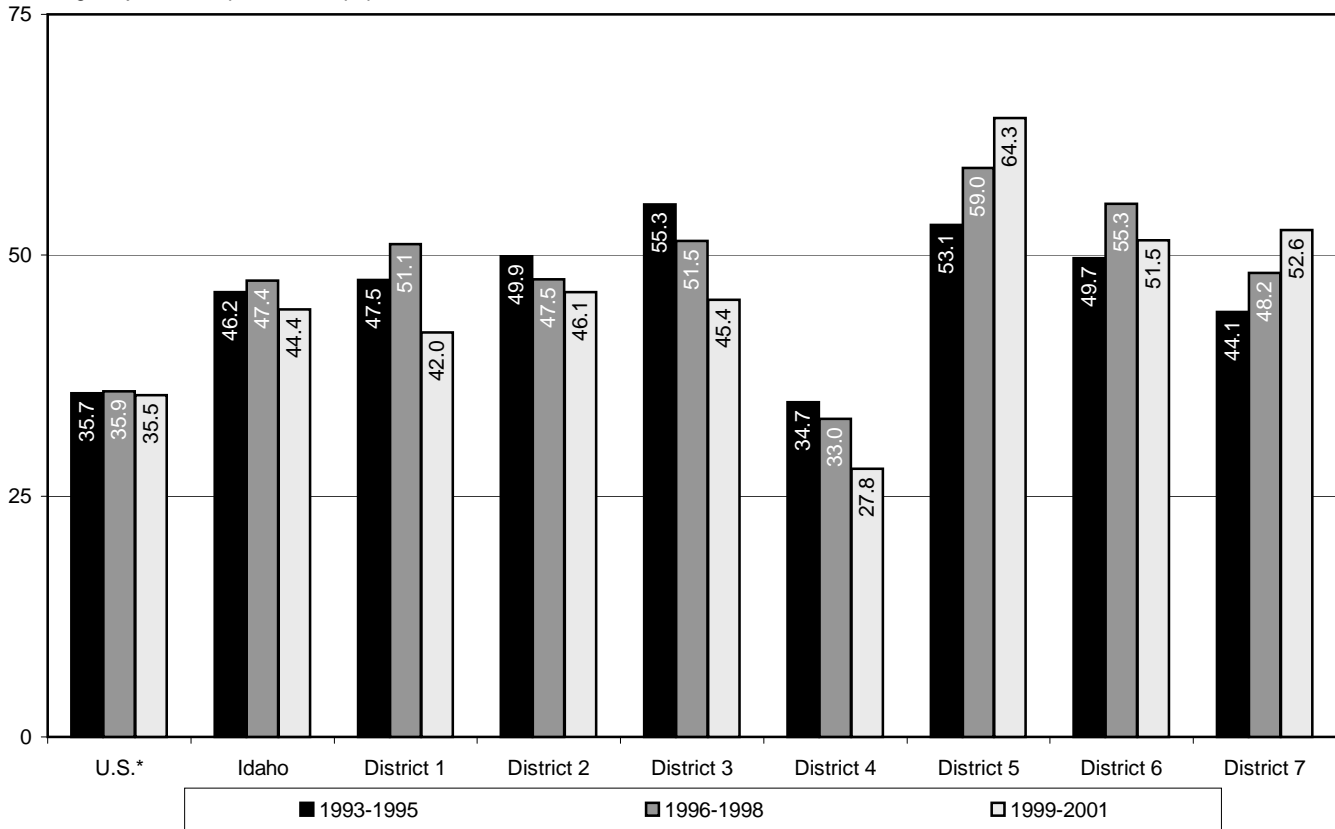
The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

1. Total number of deaths and average annual age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
- Interpretation 1: The Idaho rate was not significantly different in 1999-2001(49.0) than the rate in 1993-1995 (48.6).
- Interpretation 2: In 1999-2001, District 1 had the highest rate (52.7); the rate for District 1 did not differ significantly from any other district in 1999-2001.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Chronic lower respiratory diseases 1.0478. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Accidental (Unintentional Injury)
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 population



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

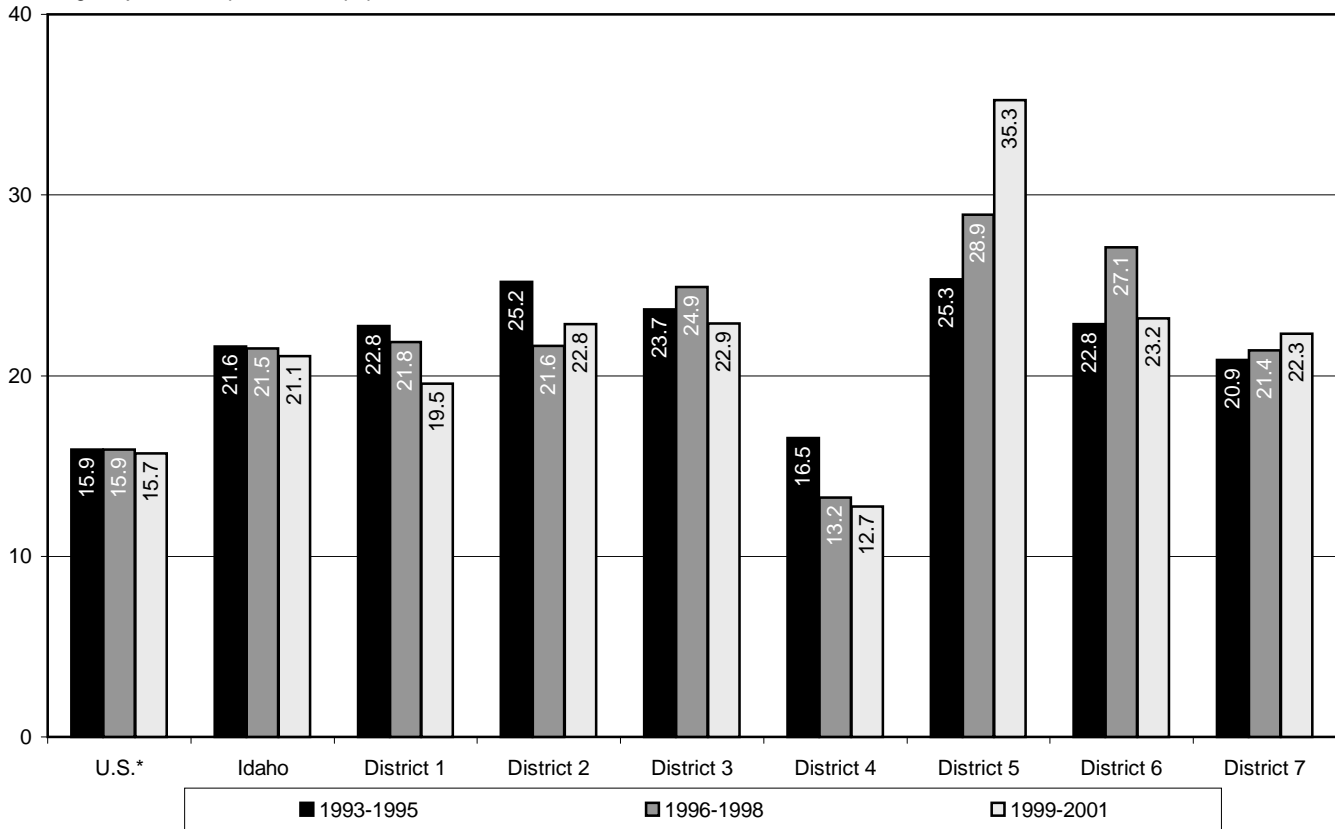
		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	1,514	209	149	265	276	230	204	180
	Rate ¹	46.2	47.5	49.9	55.3	34.7	53.1	49.7	44.1
	95% CI ²	43.8 - 48.5	40.9 - 54	41.7 - 58.1	48.5 - 62.1	30.5 - 39.0	46.1 - 60.1	42.7 - 56.7	37.3 - 50.9
1996-1998	Deaths ¹	1,669	250	145	267	290	273	246	198
	Rate ¹	47.4	51.1	47.5	51.5	33.0	59.0	55.3	48.2
	95% CI ²	45.0 - 49.7	44.7 - 57.6	39.6 - 55.4	45.2 - 57.8	29.1 - 36.9	51.9 - 66.2	48.2 - 62.5	41.2 - 55.1
1999-2001	Deaths ¹	1,671	224	145	257	267	314	228	236
	Rate ¹	44.4	42.0	46.1	45.4	27.8	64.3	51.5	52.6
	95% CI ²	42.2 - 46.5	36.4 - 47.5	39.0 - 53.3	39.8 - 51.0	24.4 - 31.2	57.1 - 71.4	44.8 - 58.3	45.7 - 59.5

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

- Total number of deaths and average annual age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 - 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
- Interpretation 1: The Idaho rate decreased 3.9%, but did not differ significantly from 46.2 in 1993-1995 to 44.4 in 1999-2001.
- Interpretation 2: In 1999-2001, District 5 had the highest rate (64.3); the rate for District 5 was significantly higher than the rate for Idaho (44.4), District 1 (42.0), District 2 (46.1), District 3 (45.4) and District 4 (27.8).
- Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Accidents is 1.0305. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Motor Vehicle Accident
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 population



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

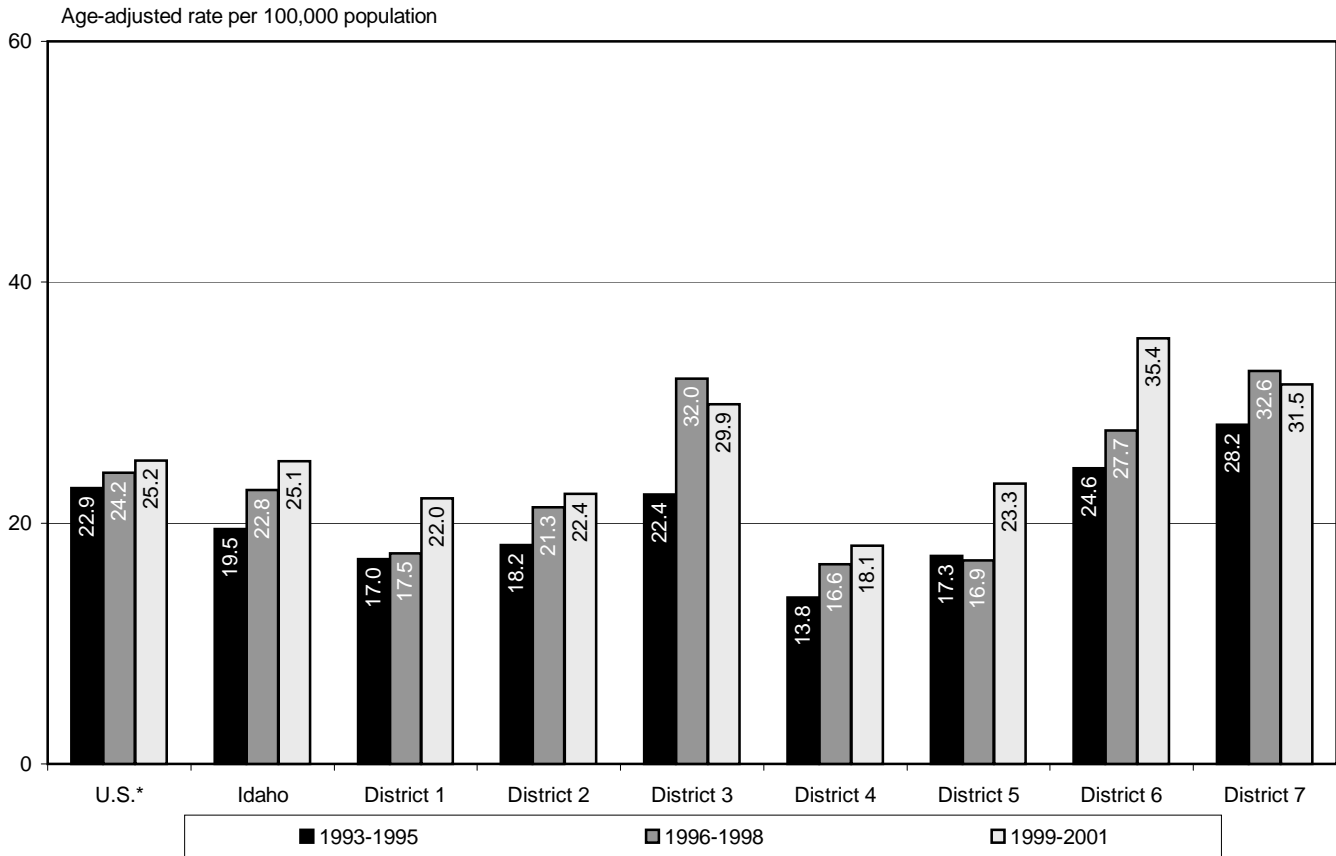
		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	733	101	77	115	139	111	98	92
	Rate ¹	21.6	22.8	25.2	23.7	16.5	25.3	22.8	20.9
	95% CI ²	20.0 - 23.2	18.4 - 27.1	19.9 - 31.5	19.4 - 28	13.8 - 19.3	20.7 - 30.0	18.3 - 27.4	16.7 - 25.7
1996-1998	Deaths ¹	779	108	65	130	123	135	126	93
	Rate ¹	21.5	21.8	21.6	24.9	13.2	28.9	27.1	21.4
	95% CI ²	20.0 - 23.0	17.8 - 25.9	16.7 - 27.5	20.6 - 29.2	10.9 - 15.6	24.1 - 33.7	22.9 - 31.3	17.2 - 26.3
1999-2001	Deaths ¹	815	102	70	130	127	170	107	109
	Rate ¹	21.1	19.5	22.8	22.9	12.7	35.3	23.2	22.3
	95% CI ²	19.6 - 22.5	15.8 - 23.3	18.0 - 28.5	18.9 - 26.8	10.5 - 15.0	29.9 - 40.6	18.7 - 27.6	18.0 - 26.6

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

1. Total number of deaths and average annual age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
 Interpretation 1: The Idaho rate decreased 2.3%, but did not change significantly from 21.6 in 1993-1995 to 21.1 in 1999-2001.
 Interpretation 2: In 1999-2001, District 5 had the highest rate (35.3); the rate for District 5 was significantly higher than the rate for Idaho (21.1) and all other districts in Idaho.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Motor vehicle accidents is 0.9754. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Diabetes Mellitus
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	591	78	54	110	90	77	92	91
	Rate ¹	19.5	17.0	18.2	22.4	13.8	17.3	24.6	28.2
	95% CI ²	17.9 - 21.1	13.4 - 21.3	13.7 - 23.7	18.2 - 26.6	11.1 - 17.0	13.6 - 21.6	19.7 - 30.2	22.6 - 34.7
1996-1998	Deaths ¹	747	88	70	167	119	78	111	115
	Rate ¹	22.8	17.5	21.3	32.0	16.6	16.9	27.7	32.6
	95% CI ²	21.1 - 24.4	14 - 21.6	16.6 - 27.0	27.1 - 36.9	13.6 - 19.6	13.3 - 21.1	22.5 - 32.9	26.6 - 38.7
1999-2001	Deaths ¹	886	121	76	166	144	117	145	117
	Rate ¹	25.1	22.0	22.4	29.9	18.1	23.3	35.4	31.5
	95% CI ²	23.5 - 26.8	18.1 - 26.0	17.8 - 27.8	25.3 - 34.4	15.1 - 21.1	19.0 - 27.5	29.6 - 41.1	25.8 - 37.3

There is no Healthy People 2010 target for Diabetes deaths.

1. Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.

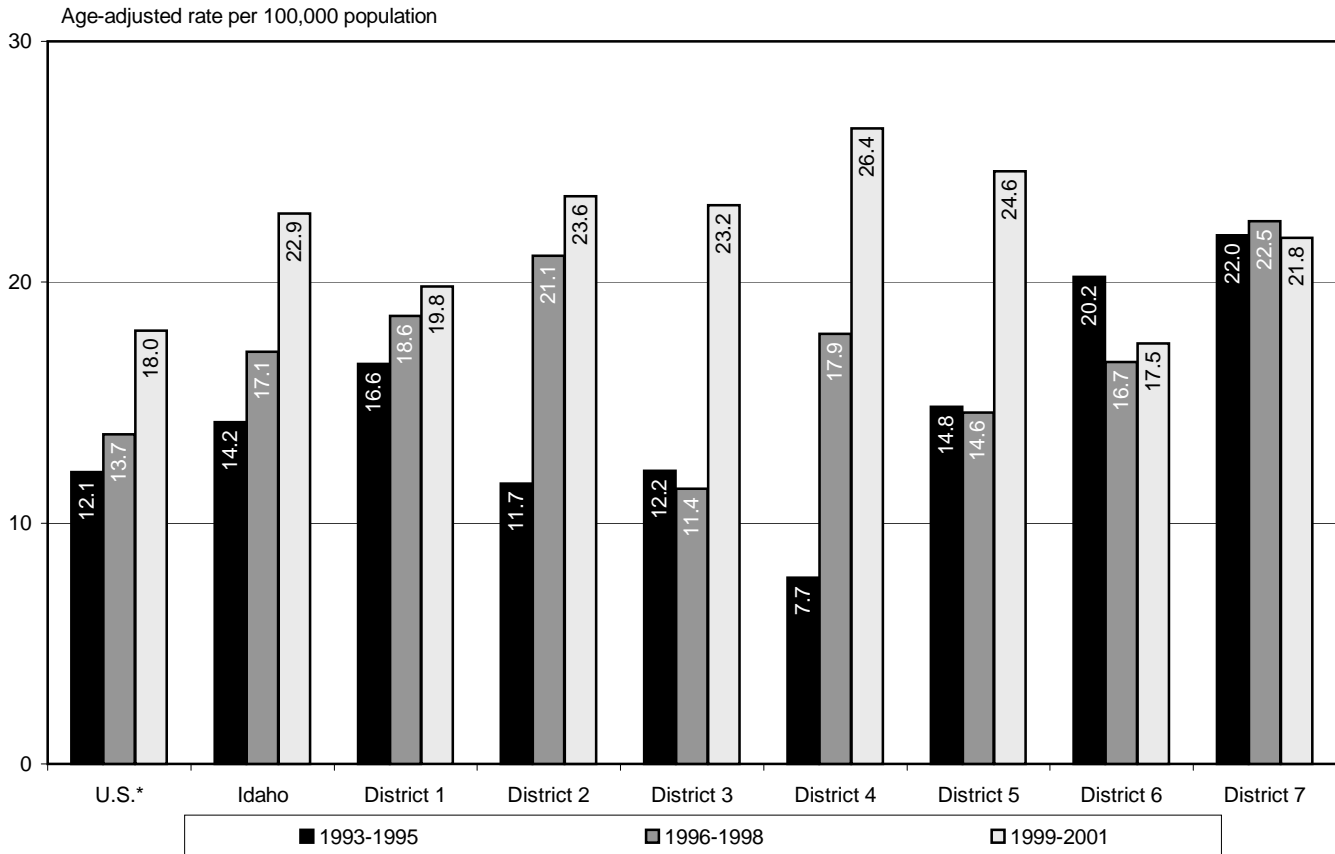
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

Interpretation 1: The Idaho rate increased 28.7% from 1993-1995 to 1999-2001. The Diabetes death rate in 1999-2001(25.1) was significantly higher than the rate in 1993-1995 (19.5).

Interpretation 2: In 1999-2001, District 6 had the highest rate (35.4); the rate for District 6 was significantly higher than the rate for Idaho (25.1), District 1 (22.0), District 2 (22.4), District 4 (18.1), and District 5 (23.3).

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Diabetes 1.0082. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes, and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Alzheimer's Disease
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	409	68	36	61	45	62	71	65
	Rate ¹	14.2	16.6	11.7	12.2	7.7	14.8	20.2	22.0
	95% CI ²	12.5 - 15.9	12.0 - 22.4	7.4 - 17.5	8.6 - 16.6	5.2 - 11.1	10.6 - 20.2	14.8 - 27.0	15.8 - 29.7
1996-1998	Deaths ¹	547	87	73	62	118	67	64	76
	Rate ¹	17.1	18.6	21.1	11.4	17.9	14.6	16.7	22.5
	95% CI ²	15.3 - 18.9	14.1 - 24.2	15.5 - 28.1	8.2 - 15.5	14.1 - 22.4	10.6 - 19.6	12.0 - 22.7	16.7 - 29.8
1999-2001	Deaths ¹	797	104	85	134	197	128	71	78
	Rate ¹	22.9	19.8	23.6	23.2	26.4	24.6	17.5	21.8
	95% CI ²	21.3 - 24.5	16.0 - 23.6	18.8 - 29.1	19.3 - 27.1	22.7 - 30.1	20.3 - 28.9	13.6 - 22.0	17.3 - 27.3

There is no Healthy People 2010 target for Alzheimer's disease deaths.

1. Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.

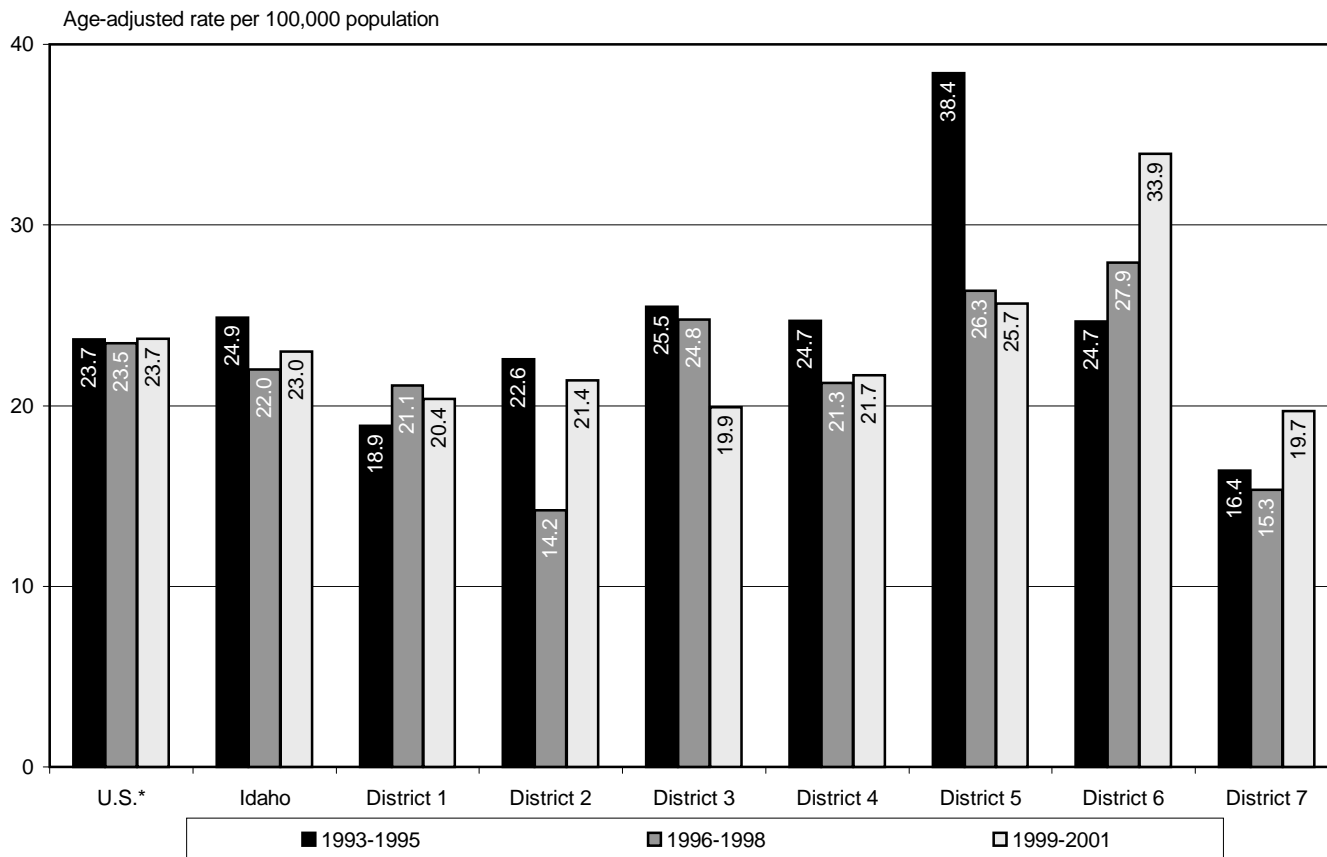
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

Interpretation 1: The Idaho rate increased 61.3% from 1993-1995 to 1999-2001. There was a significant difference in the rate of 14.2 in 1993-1995 from the rate of 22.9 in 1999-2001.

Interpretation 2: In 1999-2001, District 4 had the highest rate (26.4); the rate for District 4 did not differ significantly from the state, but was significantly higher than District 6 (17.5) in 1999-2001.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Alzheimer's disease is 1.5536. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Influenza and Pneumonia
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	715	78	69	125	148	158	87	50
	Rate ¹	24.9	18.9	22.6	25.5	24.7	38.4	24.7	16.4
	95% CI ²	23.3 - 26.4	15.4 - 22.4	18.3 - 27.5	21.7 - 29.2	21.4 - 28.1	33.4 - 43.4	20.3 - 29	12.8 - 20.7
1996-1998	Deaths ¹	708	99	48	134	145	120	109	52
	Rate ¹	22.0	21.1	14.2	24.8	21.3	26.3	27.9	15.3
	95% CI ²	20.6 - 23.3	17.6 - 24.6	11.0 - 18.0	21.3 - 28.3	18.4 - 24.2	22.4 - 30.3	23.5 - 32.3	12.0 - 19.3
1999-2001	Deaths ¹	806	108	76	115	165	132	139	71
	Rate ¹	23.0	20.4	21.4	19.9	21.7	25.7	33.9	19.7
	95% CI ²	21.4 - 24.6	16.5 - 24.2	16.9 - 26.8	16.3 - 23.5	18.4 - 25.0	21.3 - 30.0	28.3 - 39.6	15.4 - 24.8

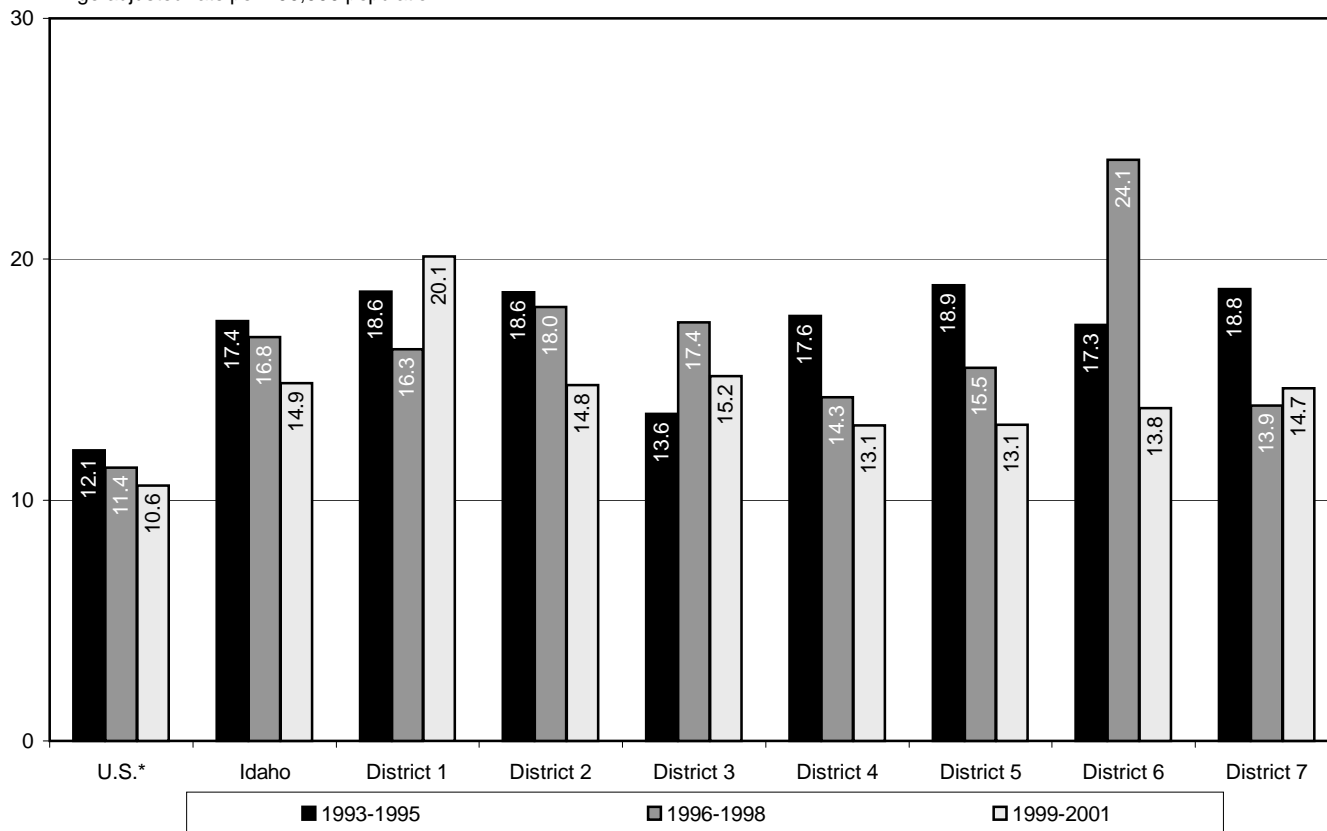
There is no Healthy People 2010 target for Influenza and pneumonia.

1. Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
- Interpretation 1: The Idaho rate decreased 7.6%, but did not change significantly from 24.9 in 1993-1995 to 23.0 in 1999-2001.
- Interpretation 2: In 1999-2001, District 6 had the highest rate (33.9); the rate for District 6 was significantly higher than state (23.0) and all other districts except District 5.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Influenza and pneumonia is 0.6982. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Intentional Self-Harm (Suicide)
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 population



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

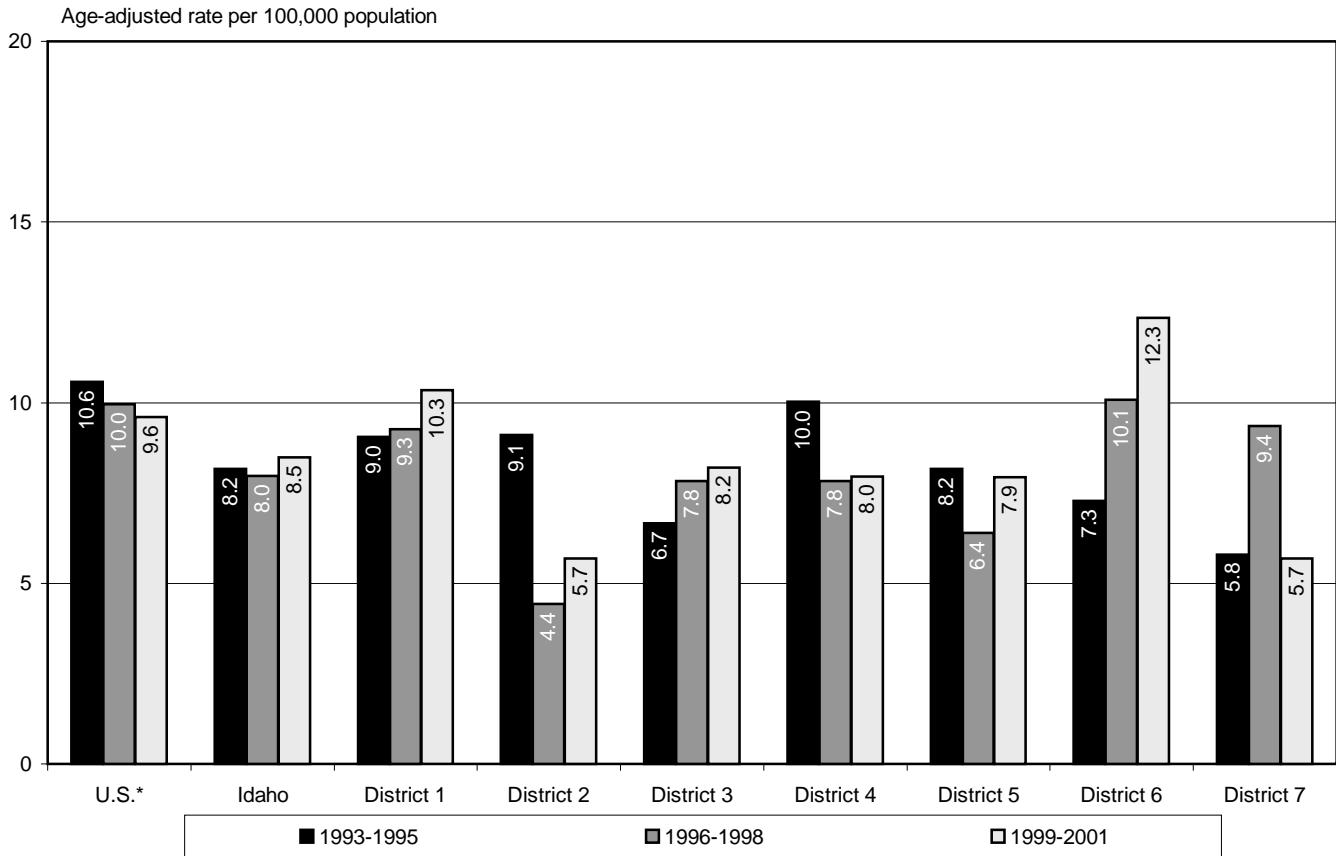
		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	569	83	55	64	139	80	73	76
	Rate ¹	17.4	18.6	18.6	13.6	17.6	18.9	17.3	18.8
	95% CI ²	16.0 - 18.9	14.8 - 23.1	14.0 - 24.3	10.4 - 17.4	14.7 - 20.6	15.0 - 23.6	13.5 - 21.8	14.7 - 23.6
1996-1998	Deaths ¹	588	82	56	89	129	71	103	60
	Rate ¹	16.8	16.3	18.0	17.4	14.3	15.5	24.1	13.9
	95% CI ²	15.4 - 18.1	12.9 - 20.2	13.6 - 23.5	13.9 - 21.4	11.8 - 16.8	12.1 - 19.5	19.4 - 28.8	10.5 - 18.0
1999-2001	Deaths ¹	559	106	49	82	130	63	62	67
	Rate ¹	14.9	20.1	14.8	15.2	13.1	13.1	13.8	14.7
	95% CI ²	13.6 - 16.1	16.3 - 24.0	11.2 - 19.0	12.1 - 18.8	10.8 - 15.4	10.1 - 16.8	10.6 - 17.8	11.3 - 18.7

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

1. Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
Interpretation 1: The Idaho rate decreased 14.4% from 17.4 in 1993-1995 to 14.9 in 1999-2001; the rates did not differ significantly.
Interpretation 2: In 1999-2001, District 1 had the highest rate (20.1); the rate for District 1 was significantly higher than state (14.9) and District 4 (13.1) in 1999-2001.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Suicide is 0.9962. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes, and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Chronic Liver Disease and Cirrhosis
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	252	43	26	31	69	34	28	21
	Rate ¹	8.2	9.0	9.1	6.7	10.0	8.2	7.3	5.8
	95% CI ²	7.1 - 9.2	6.5 - 12.3	5.9 - 13.4	4.5 - 9.5	7.7 - 12.7	5.6 - 11.5	4.8 - 10.6	3.5 - 9.0
1996-1998	Deaths ¹	266	48	13	39	61	29	40	35
	Rate ¹	8.0	9.3	4.4	7.8	7.8	6.4	10.1	9.4
	95% CI ²	7.0 - 8.9	6.8 - 12.4	2.4 - 7.6	5.5 - 10.7	6.0 - 10.1	4.2 - 9.2	7.2 - 13.8	6.5 - 13.1
1999-2001	Deaths ¹	306	60	18	44	72	38	51	23
	Rate ¹	8.5	10.3	5.7	8.2	8.0	7.9	12.3	5.7
	95% CI ²	7.5 - 9.4	7.9 - 13.3	3.6 - 8.6	6.0 - 11.0	6.2 - 10.1	5.6 - 10.9	9.2 - 16.2	3.6 - 8.5

There is no Healthy People 2010 target for Chronic liver disease and cirrhosis.

1. Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.

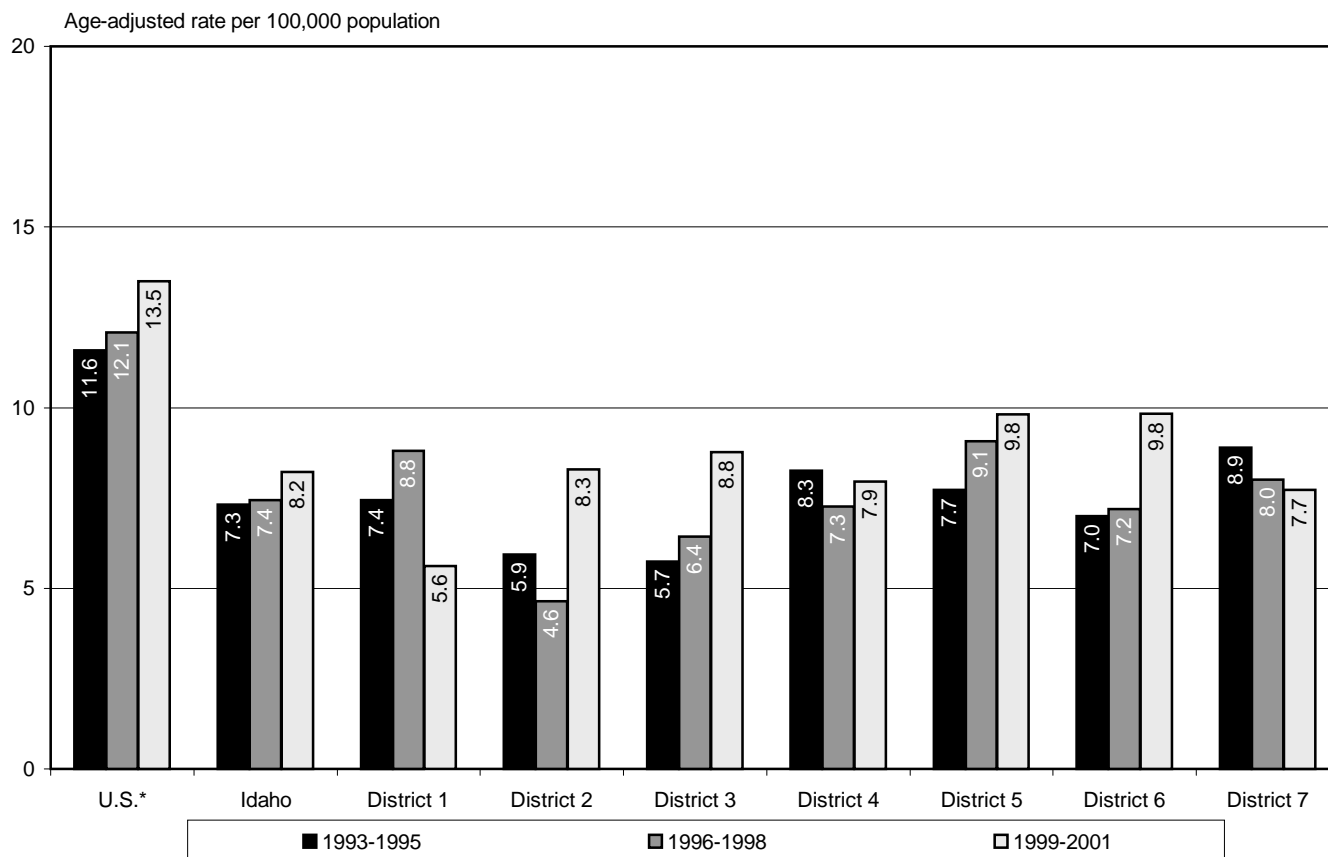
2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

Interpretation 1: The Idaho rate increased 3.7% from 1993-1995 to 1999-2001; the rates do not differ significantly in the two time periods.

Interpretation 2: In 1999-2001, District 6 had the highest rate (12.3); the rate for District 6 did not differ significantly from the state, but was significantly higher than District 2 (5.7) and District 7 (5.7) in 1999-2001.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Chronic liver disease and cirrhosis is 1.0367. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Nephritis, Nephrotic Syndrome and Nephrosis (Diseases of the Kidneys)
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

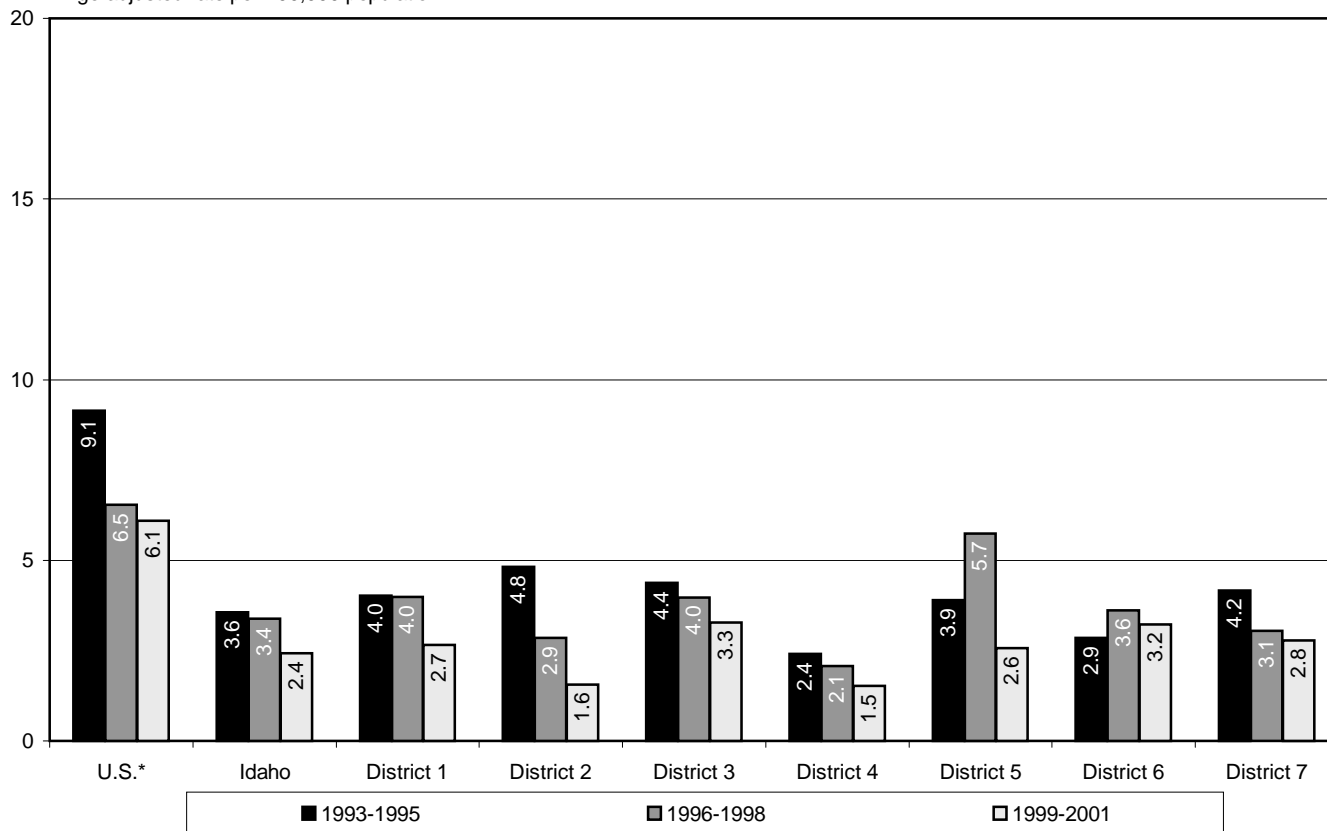
		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	216	33	18	28	51	33	25	27
	Rate ¹	7.3	7.4	5.9	5.7	8.3	7.7	7.0	8.9
	95% CI ²	6.2 - 8.4	4.9 - 10.8	3.3 - 9.8	3.6 - 8.6	5.9 - 11.2	5.1 - 11.2	4.3 - 10.8	5.6 - 13.5
1996-1998	Deaths ¹	241	42	16	34	51	42	28	28
	Rate ¹	7.4	8.8	4.6	6.4	7.3	9.1	7.2	8.0
	95% CI ²	6.4 - 8.5	6.1 - 12.3	2.5 - 7.9	4.3 - 9.3	5.2 - 9.9	6.3 - 12.7	4.6 - 10.8	5.1 - 12.0
1999-2001	Deaths ¹	288	30	29	50	61	50	40	28
	Rate ¹	8.2	5.6	8.3	8.8	7.9	9.8	9.8	7.7
	95% CI ²	7.3 - 9.2	3.8 - 8.0	5.6 - 11.9	6.5 - 11.6	6.1 - 10.2	7.3 - 12.9	7.0 - 13.4	5.1 - 11.2

There is no Healthy People 2010 target for Nephritis, nephrotic syndrome and nephrosis.

- Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 - 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
Interpretation 1: The Idaho rate increased 12.3% from 1993-1995 to 1999-2001; the rates did not differ significantly in the two time periods.
Interpretation 2: In 1999-2001, District 5 and District 6 were tied with the highest rate (9.8); the rate for neither District 5 or District 6 differed significantly from the state or any other district in 1999-2001.
- Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Nephritis, nephrotic syndrome and nephrosis is 1.2320. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

U.S., Idaho and District Resident Deaths
Homicide
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 population



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	122	18	13	21	20	17	13	20
	Rate ¹	3.6	4.0	4.8	4.4	2.4	3.9	2.9	4.2
	95% CI ²	2.9 - 4.2	2.4 - 6.3	2.6 - 8.2	2.7 - 6.7	1.5 - 3.8	2.3 - 6.3	1.5 - 4.9	2.5 - 6.5
1996-1998	Deaths ¹	123	20	8	20	20	27	15	13
	Rate ¹	3.4	4.0	2.9	4.0	2.1	5.7	3.6	3.1
	95% CI ²	2.8 - 4.0	2.4 - 6.1	1.2 - 5.6	2.4 - 6.1	1.3 - 3.2	3.8 - 8.3	2.0 - 6.0	1.6 - 5.3
1999-2001	Deaths ¹	94	14	5	19	17	12	14	13
	Rate ¹	2.4	2.7	1.6	3.3	1.5	2.6	3.2	2.8
	95% CI ²	2.0 - 3.0	1.5 - 4.5	0.6 - 3.4	2.0 - 5.1	0.9 - 2.4	1.3 - 4.5	1.8 - 5.4	1.4 - 4.9

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

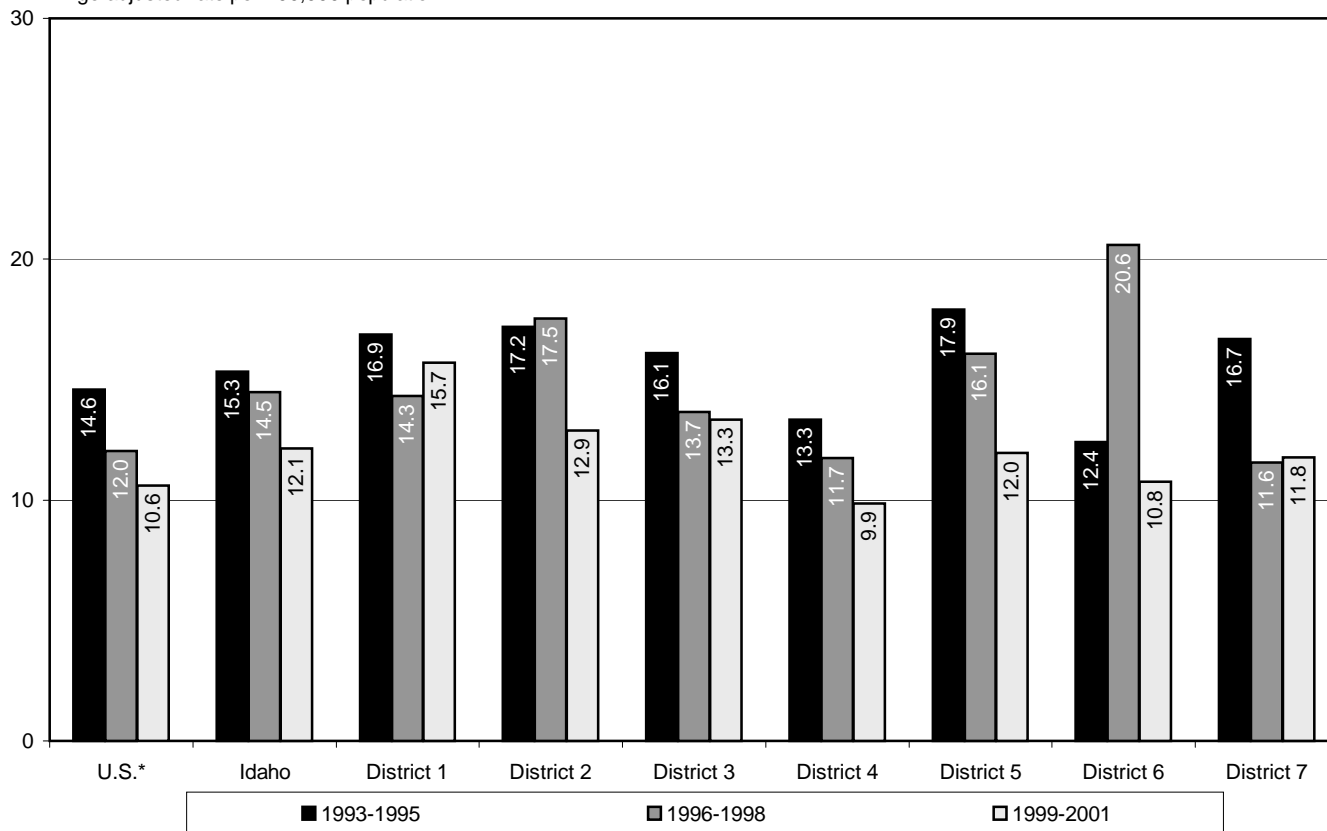
- Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
- 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
Interpretation 1: The Idaho rate decreased 33.3% from 3.6 in 1993-1995 to 2.4 in 1999-2001; the rates do not differ significantly.
Interpretation 2: In 1999-2001, District 3 had the highest rate (3.3); the rate for District 3 was not significantly higher than state or any other district in 1999-2001.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Homicide is 0.9983. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes, and/or age-adjustment, see Technical notes at the end of the report.

Rates for some districts are based on small numbers (< 20 deaths). Exercise caution when interpreting rates based on small numbers.

U.S., Idaho and District Resident Deaths
Injury By Firearm
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 population



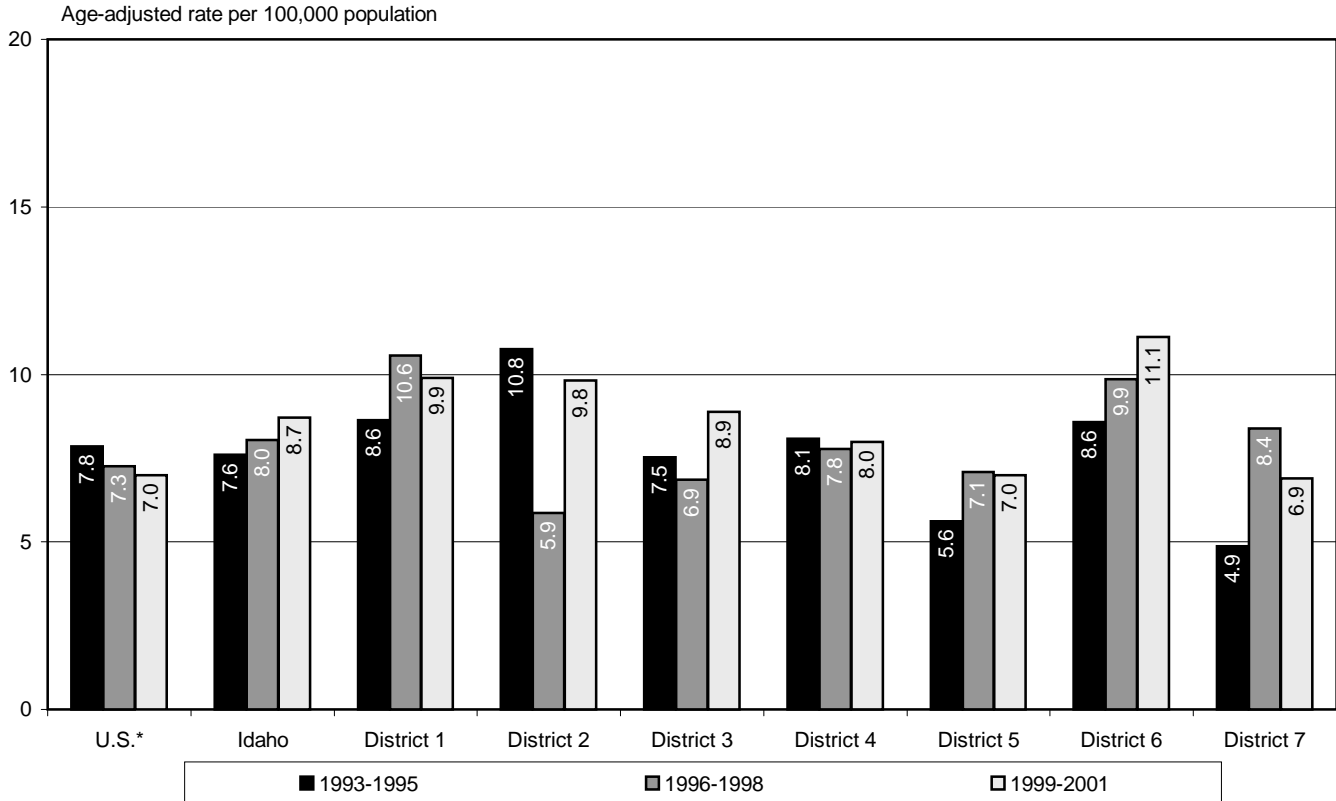
*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	507	76	51	77	106	76	53	69
	Rate ¹	15.3	16.9	17.2	16.1	13.3	17.9	12.4	16.7
	95% CI ²	14.0 - 16.7	13.3 - 21.1	12.8 - 22.7	12.7 - 20.1	10.8 - 15.9	14.1 - 22.4	9.3 - 16.3	12.9 - 21.2
1996-1998	Deaths ¹	513	72	55	70	106	75	87	49
	Rate ¹	14.5	14.3	17.5	13.7	11.7	16.1	20.6	11.6
	95% CI ²	13.2 - 15.8	11.2 - 18.0	13.2 - 22.9	10.6 - 17.3	9.5 - 14.0	12.6 - 20.1	16.5 - 25.4	8.5 - 15.4
1999-2001	Deaths ¹	458	84	42	73	98	58	48	55
	Rate ¹	12.1	15.7	12.9	13.3	9.9	12.0	10.8	11.8
	95% CI ²	11.0 - 13.3	12.5 - 19.5	9.2 - 17.5	10.4 - 16.8	8.0 - 12.1	9.1 - 15.5	7.9 - 14.3	8.8 - 15.4

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

1. Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.
 2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.
- Interpretation 1: The Idaho rate decreased 20.9% from 15.3 in 1993-1995 to 12.1 in 1999-2001. The Idaho firearm injury death rate in 1999-2001 was significantly lower than the rate in 1993-1995.
- Interpretation 2: In 1999-2001, District 1 had the highest rate (15.7); the rate for District 1 did not differ significantly from the state, but was significantly higher than District 4 (9.9) in 1999-2001.
- Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Firearm injury is 0.9973. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age- adjustment, see Technical notes at the end of the report. See Definitions for definition of firearm injury death.

U.S., Idaho and District Resident Deaths
Alcohol-Induced
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. age-adjusted rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	235	41	30	34	57	23	33	17
	Rate ¹	7.6	8.6	10.8	7.5	8.1	5.6	8.6	4.9
	95% CI ²	6.7 - 8.6	6.2 - 11.7	7.3 - 15.3	5.2 - 10.5	6.1 - 10.5	3.6 - 8.3	5.9 - 12.0	2.9 - 7.7
1996-1998	Deaths ¹	270	54	17	34	61	32	40	32
	Rate ¹	8.0	10.6	5.9	6.9	7.8	7.1	9.9	8.4
	95% CI ²	7.1 - 9.0	8.0 - 13.7	3.5 - 9.3	4.8 - 9.5	6.0 - 10.0	4.9 - 10	7.1 - 13.4	5.8 - 11.8
1999-2001	Deaths ¹	316	58	31	47	73	33	46	28
	Rate ¹	8.7	9.9	9.8	8.9	8.0	7.0	11.1	6.9
	95% CI ²	7.8 - 9.7	7.5 - 12.8	6.7 - 13.9	6.5 - 11.8	6.2 - 10.1	5.0 - 9.4	8.1 - 14.8	4.6 - 10.0

There is no Healthy People 2010 target for alcohol induced deaths.

1. Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.

2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

Interpretation 1: The Idaho rate increased 14.5% from 7.6 in 1993-1995 to 8.7 in 1999-2001; the rates did not differ significantly.

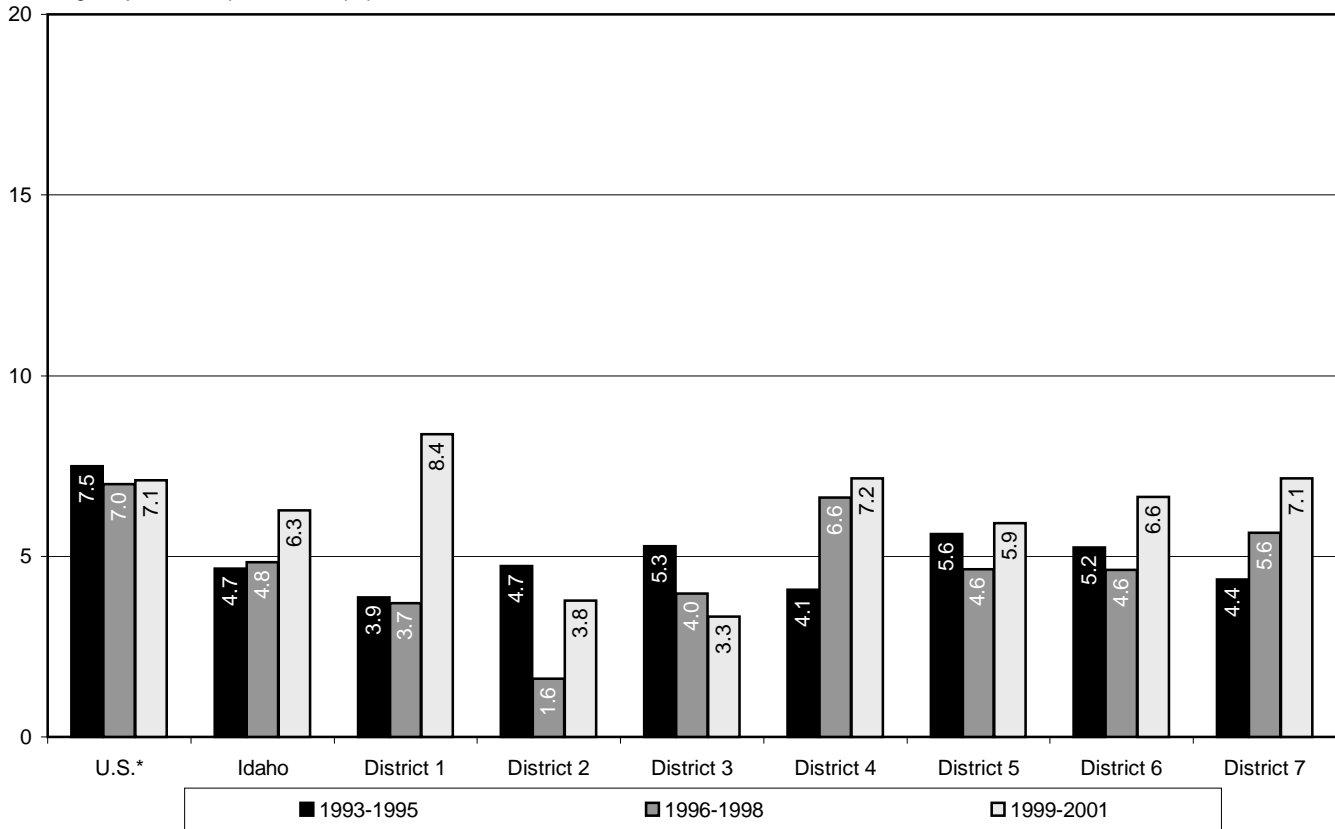
Interpretation 2: In 1999-2001, District 6 had the highest rate (11.1); the rate for District 6 did not differ significantly from the state, or the rate for or any other district in 1999-2001.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Alcohol-induced deaths is 0.9682. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes. See Definitions for definition of alcohol-induced death.

Rates for some districts are based on small numbers (< 20 deaths). Exercise caution when interpreting rates based on small numbers.

U.S., Idaho and District Resident Deaths
Drug-Induced
Average Annual Age-Adjusted Rates
1993-1995, 1996-1998, and 1999-2001

Age-adjusted rate per 100,000 population



*U.S. age-adjusted rate in 1998, 1999, and 2000; rate for 1998 was modified by comparability ratio. Rates for 1994 and 1997 not available.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	148	17	13	23	33	24	22	17
	Rate ¹	4.7	3.9	4.7	5.3	4.1	5.6	5.2	4.4
	95% CI ²	3.9 - 5.5	2.1 - 6.5	2.4 - 8.5	3.2 - 8.3	2.7 - 5.9	3.4 - 8.7	3.1 - 8.3	2.4 - 7.3
1996-1998	Deaths ¹	166	19	5	19	62	20	19	22
	Rate ¹	4.8	3.7	1.6	4.0	6.6	4.6	4.6	5.6
	95% CI ²	4.0 - 5.6	2.1 - 6.0	0.4 - 4.1	2.3 - 6.4	4.9 - 8.7	2.7 - 7.4	2.6 - 7.5	3.3 - 8.9
1999-2001	Deaths ¹	233	46	11	18	74	27	28	29
	Rate ¹	6.3	8.4	3.8	3.3	7.2	5.9	6.6	7.1
	95% CI ²	5.5 - 7.1	6.1 - 11.2	1.9 - 6.8	2.0 - 5.3	5.6 - 9.0	4.1 - 8.2	4.4 - 9.6	4.8 - 10.3

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

1. Total number of deaths and annual average age-adjusted death rate per 100,000 population. Rates are standardized to the year 2000 U.S. Standard Population.

2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true age-adjusted rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

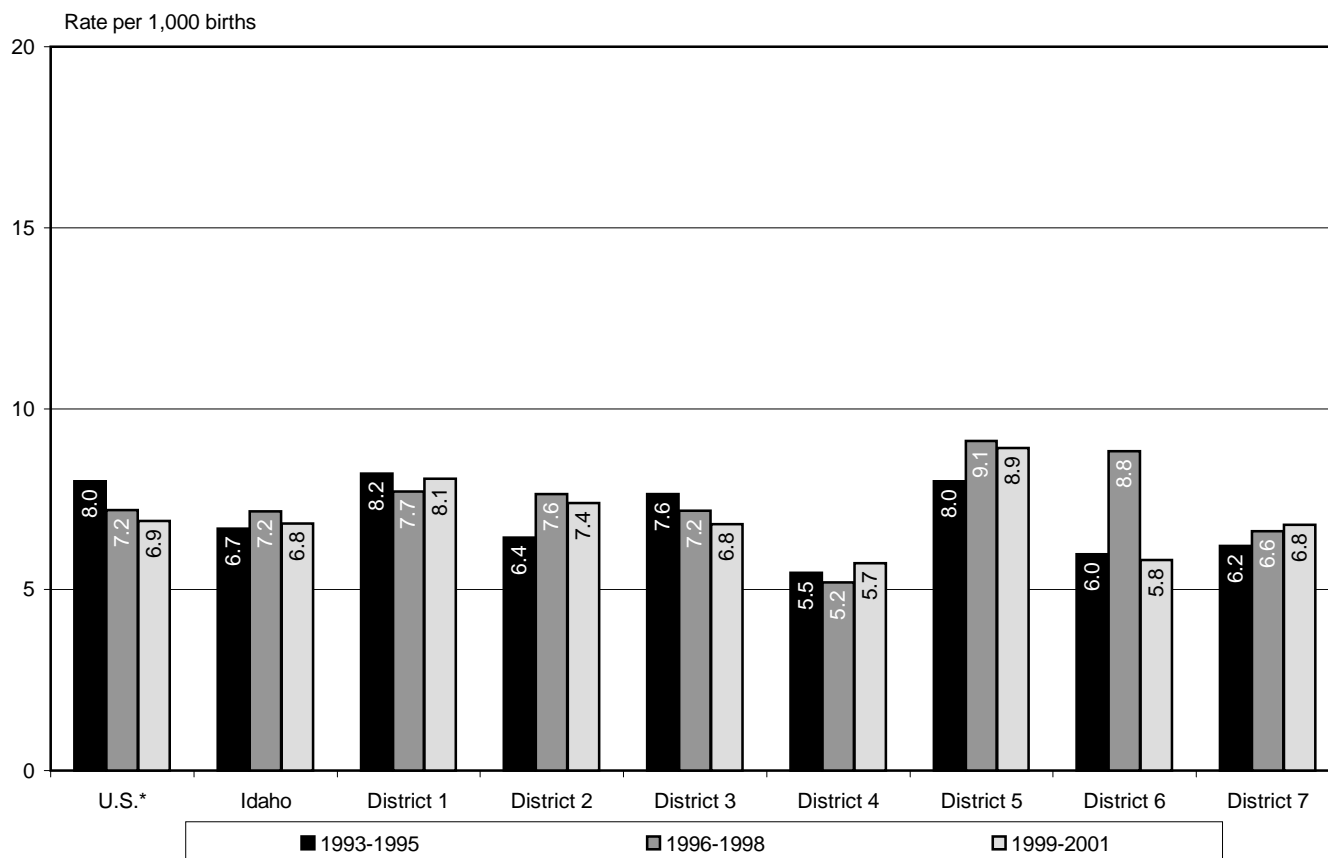
Interpretation 1: The Idaho rate increased 34.0%, but the rates did not differ significantly from 4.7 in 1993-1995 to 6.3 in 1999-2001.

Interpretation 2: In 1999-2001, District 1 had the highest rate (8.4); the rate for District 1 did not differ significantly from the Idaho rate, but was significantly higher than the rate for District 3 (3.3).

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Drug-induced deaths is 1.1950. For additional information regarding Modified ICD-9 codes, comparability ratios, ICD-10 codes and/or age-adjustment, see Technical notes. See Definitions for definition of drug-induced death.

Rates for some districts are based on small numbers (< 20 deaths). Exercise caution when interpreting rates based on small numbers.

U.S., Idaho and District Resident Deaths
Infant Deaths
Three-Year Infant Mortality Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. infant mortality rate in 1994, 1997, and 2000.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	354	49	23	61	71	56	46	48
	Rate ¹	6.7	8.2	6.4	7.6	5.5	8.0	6.0	6.2
	95% CI ²	6.0 - 7.4	6.1 - 10.8	4.1 - 9.7	5.8 - 9.8	4.3 - 6.9	6.0 - 10.4	4.4 - 8.0	4.6 - 8.2
1996-1998	Deaths ¹	404	49	27	64	76	68	69	51
	Rate ¹	7.2	7.7	7.6	7.2	5.2	9.1	8.8	6.6
	95% CI ²	6.5 - 7.9	5.7 - 10.2	5.0 - 11.1	5.5 - 9.2	4.1 - 6.5	7.1 - 11.6	6.9 - 11.2	4.9 - 8.7
1999-2001	Deaths ¹	415	55	25	69	94	69	48	55
	Rate ¹	6.8	8.1	7.4	6.8	5.7	8.9	5.8	6.8
	95% CI ²	6.2 - 7.5	6.1 - 10.5	4.8 - 10.9	5.3 - 8.6	4.6 - 7.0	6.9 - 11.3	4.3 - 7.7	5.1 - 8.8

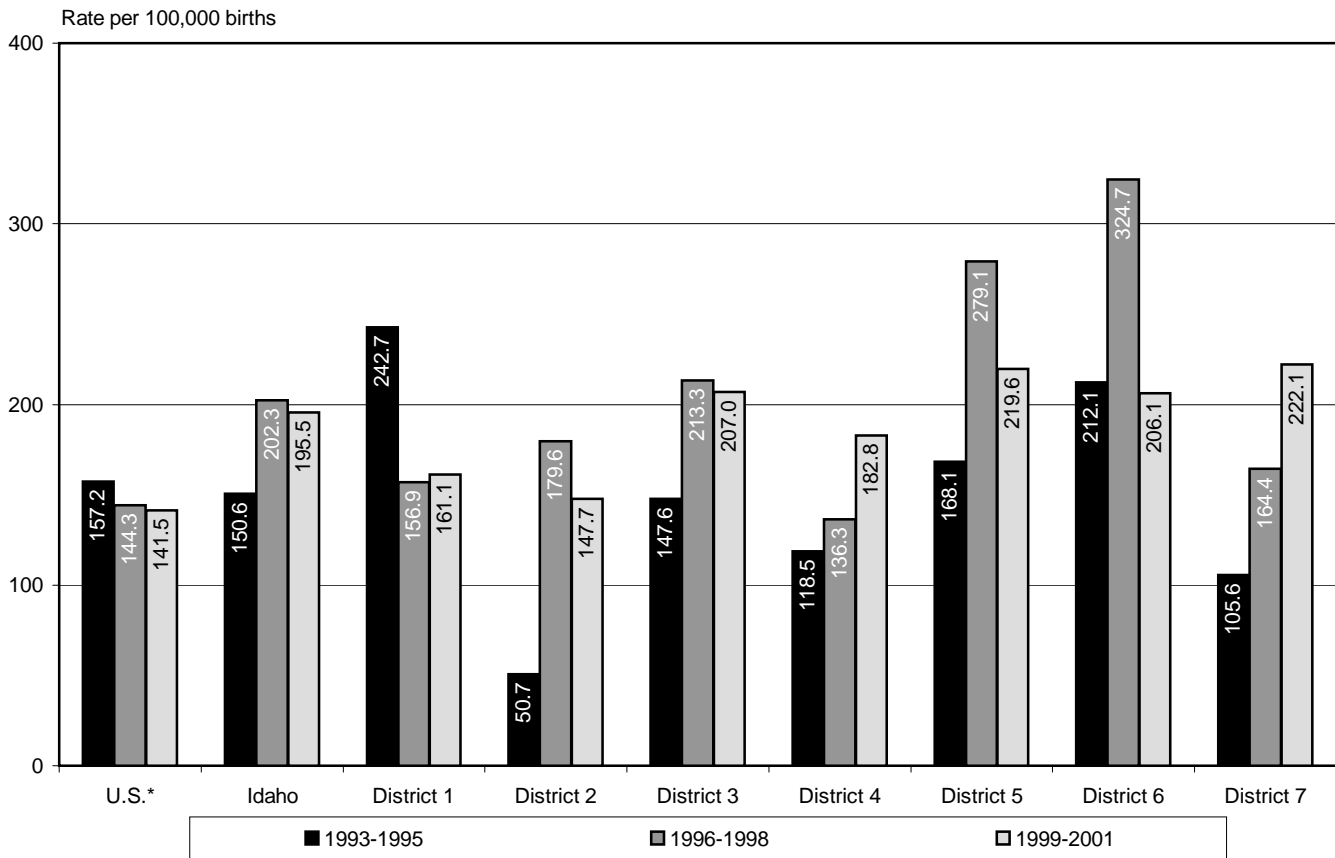
The Healthy People 2010 target 4.5 deaths per 1,000 live births.

- Three-year total number of infant deaths and infant death rate per 1,000 births. Infant death is death to infant aged less than one year.
- 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true infant death rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

Interpretation 1: The Idaho rate did not change significantly from 6.7 in 1993-1995 to 6.8 in 1999-2001.

Interpretation 2: In 1999-2001, District 5 had the highest infant death rate (8.9 per 1,000 births); the rate for District 5 was not significantly higher than the rate for Idaho (6.8) or the rate for any other district in Idaho.

U.S., Idaho and District Resident Deaths
Infant Deaths - Congenital Malformations (Birth Defects)
Three-Year Infant Mortality Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. rate for Congenital malformation deaths in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	80	15	2	12	15	12	16	8
	Rate ¹	150.6	242.7	50.7	147.6	118.5	168.1	212.1	105.6
	95% CI ²	119.1 - 182.1	132.7 - 407.2	6.1 - 183.2	76.3 - 257.9	66.3 - 195.5	86.9 - 293.7	121.3 - 344.5	45.6 - 208.1
1996-1998	Deaths ¹	114	10	6	19	20	21	25	13
	Rate ¹	202.3	156.9	179.6	213.3	136.3	279.1	324.7	164.4
	95% CI ²	166.9 - 237.7	75.2 - 288.5	65.9 - 391	128.4 - 333.1	83.2 - 210.4	172.8 - 426.7	210.1 - 479.3	87.5 - 281.1
1999-2001	Deaths ¹	119	11	5	21	30	17	17	18
	Rate ¹	195.5	161.1	147.7	207.0	182.8	219.6	206.1	222.1
	95% CI ²	160.4 - 230.7	80.4 - 288.3	48.0 - 344.7	128.1 - 316.4	123.4 - 261	127.9 - 351.5	120.1 - 330	131.6 - 351

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

1. Three-yr total number of infant deaths and infant death rate per 100,000 births. Infant death is death to infant aged less than one year.

2. 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true infant death rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

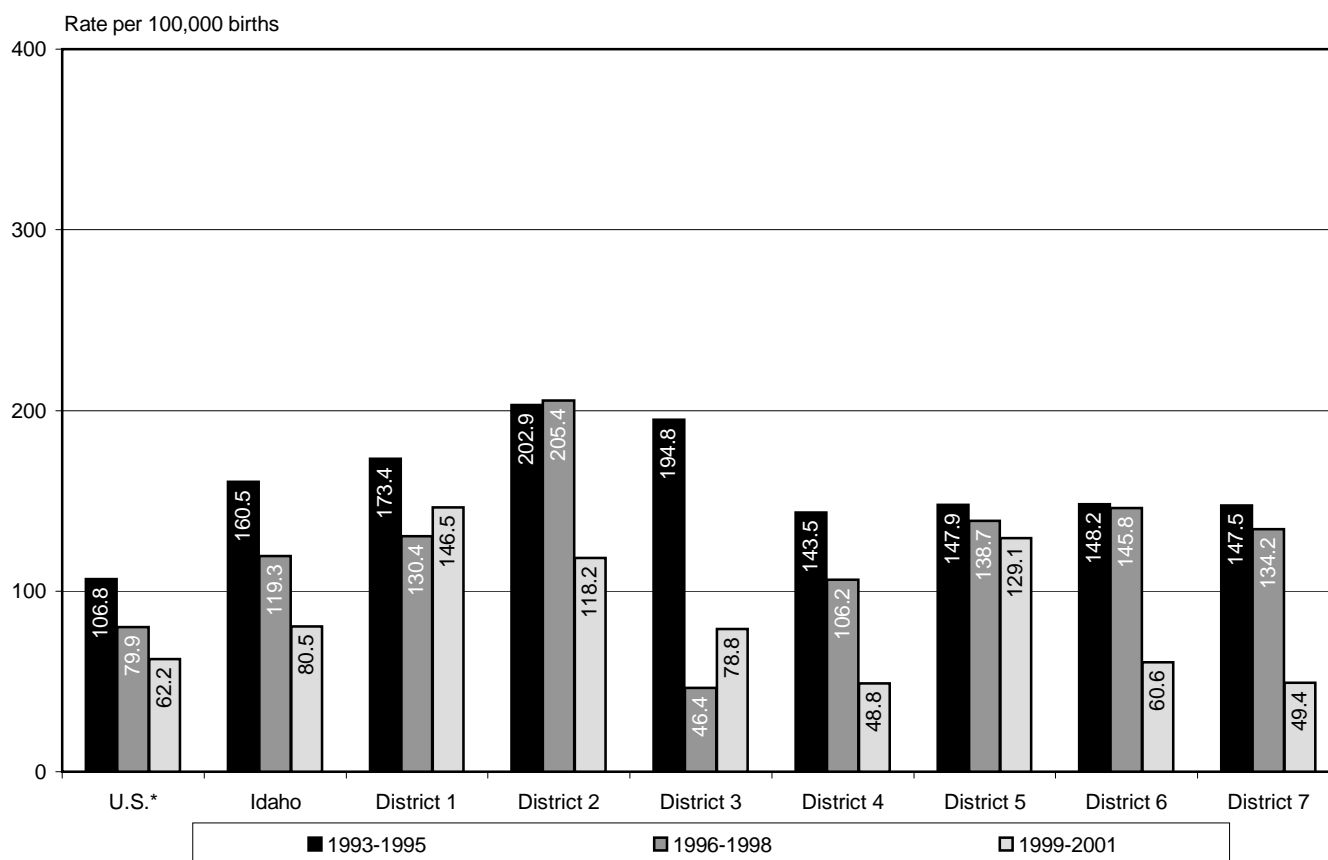
Interpretation 1: The Idaho rate increased 29.8%, however, the rates did not differ significantly from 1993-1995 to 1999-2001.

Interpretation 2: In 1999-2001, District 7 had the highest infant death rate due to congenital malformations (222.1 per 100,000 births); the rate for District 7 was not significantly higher than the rate for Idaho (195.5) or the rate for any other district in Idaho.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for Congenital malformation deaths is 0.9064. For additional information regarding Modified ICD-9 codes, comparability ratios ICD-10 codes and/or age-adjustment, see Technical notes at the end of the report.

Rates for some districts are based on small numbers (< 20 deaths). Exercise caution when interpreting rates based on small numbers.

U.S., Idaho and District Resident Deaths
Infant Deaths - Sudden Infant Death Syndrome (SIDS)
Three-Year Infant Mortality Rates
1993-1995, 1996-1998, and 1999-2001



*U.S. SIDS rate in 1994, 1997, and 2000; rates for 1994 and 1997 have been modified by comparability ratio.

		Idaho	District 1	District 2	District 3	District 4	District 5	District 6	District 7
1993-1995	Deaths ¹	85	10	7	16	19	10	11	11
	Rate ¹	160.5	173.4	202.9	194.8	143.5	147.9	148.2	147.5
	95% CI ²	125.7 - 195.2	83.1 - 318.9	81.6 - 418.0	111.3 - 316.3	86.4 - 224.1	70.9 - 271.9	74.0 - 265.2	73.7 - 264.0
1996-1998	Deaths ¹	67	8	7	4	16	10	11	10
	Rate ¹	119.3	130.4	205.4	46.4	106.2	138.7	145.8	134.2
	95% CI ²	90.3 - 148.3	56.3 - 257	82.6 - 423.1	12.7 - 118.9	60.7 - 172.5	66.5 - 255.1	72.8 - 260.9	64.4 - 246.9
1999-2001	Deaths ¹	49	10	4	8	8	10	5	4
	Rate ¹	80.5	146.5	118.2	78.8	48.8	129.1	60.6	49.4
	95% CI ²	58.0 - 103.1	70.2 - 269.4	32.2 - 302.6	34.0 - 155.4	21.0 - 96.1	61.9 - 237.5	19.7 - 141.5	13.4 - 126.4

The current Healthy People 2010 target for this cause is based on non-modified ICD-9 codes which is not compatible with data shown.

- Three-year total number of SIDS deaths and SIDS death rate per 100,000 births. Infant death is death to infant aged less than one year.
- 95 percent confidence interval. This interval can be interpreted to mean that there is a 95 percent certainty the true infant death rate falls within the confidence interval. If a confidence interval overlaps with another confidence interval, the rates for the two areas are not significantly different at the 95-percent level. If the intervals do not overlap, the rates are significantly different at the 95-percent level.

Interpretation 1: The Idaho rate decreased 50.0% from 160.5 in 1993-1995 to 80.5 in 1999-2001; this was a significant change in the rate.

Interpretation 2: In 1999-2001, District 1 had the highest SIDS rate (146.5 per 100,000 births); the rate for District 1 was not significantly higher than the rate for Idaho (80.5) or the rate for any other district in Idaho.

Statistics for 1993-1995 and 1996-1998 have been revised using the Modified ICD-9 codes and comparability ratios. The estimated ICD-10 to ICD-9 comparability ratio for SIDS is 1.0362. For additional information regarding Modified ICD-9 codes, comparability ratios, and ICD-10 codes see Technical notes at the end of the report.

Rates for some districts are based on small numbers (< 20 deaths). Exercise caution when interpreting rates based on small numbers.

Idaho and District Birth and Age-Adjusted Death Rates
And
Testing for Significance, 1999-2001

Idaho and District 1 Resident Live Births
Three-Year Percent, 1999-2001

Nativity Indicator	Idaho Percent of Births	District 1 Percent of Births		
		District 1 is Significantly Higher than the State	District 1 Does Not Differ Significantly from the State	District 1 is Significantly Lower than the State
First Trimester Prenatal Care ¹	81.1			77.3
Preterm Births ²	10.2			8.3
Low Birth Weight ³	6.4			5.6
Births to Unmarried Mothers ⁴	21.8	26.8		
Tobacco Use During Pregnancy ⁵	11.8	19.7		

1. First trimester prenatal care is a positive indicator. The percent of mothers receiving first trimester prenatal care in District 1 was significantly lower or worse than the state.
2. Percents are based on records with known data for gestation. Preterm: Babies born prior to 37 completed weeks of gestation.
3. Percents are based on records with known data for birth weight. Low Birth Weight: Babies born weighing less than 2,500 grams.
4. Percents are based on records with known marital status.
5. Percents are based on records with known data for tobacco use.

Idaho and District 1 Resident Teen Pregnancy Rate
Three-Year Average Annual Rate per 1,000 females aged 15-17, 1999-2001

	Idaho Rate Per 1,000 females	District 1 Rate per 1,000 females		
		District 1 is Significantly Higher than State	District 1 Does Not Differ Significantly from the State	District 1 is Significantly Lower than the State
Teen Pregnancy Rate ¹	25.6	27.8		

1. Teen Pregnancy Rate: Total number of pregnancies for teens age 15-17 per 1,000 females aged 15-17.

Idaho and District 1 Resident Deaths
Three-Year Average Annual Age-Adjusted Death Rates, 1999-2001

Cause of Death	Idaho Average Annual Age-Adjusted Death Rate ¹	District 1 Average Annual Age-Adjusted Death Rate ¹		
		District 1 Rate is Significantly Higher than the State Rate	District 1 Rate Does Not Differ Significantly from the State Rate	District 1 Rate is Significantly Lower than the State Rate
Diseases of heart	214.0		217.2	
Malignant neoplasms (cancer)	180.5	200.6		
Lung cancer	44.8	56.5		
Colorectal cancer	16.9		21.2	
Female breast cancer	24.8		25.4	
Prostate cancer	32.3		33.6	
Cerebrovascular diseases (stroke)	64.6	83.1		
Chronic lower respiratory diseases	49.0		52.7	
Accidents	44.4		42.0	
Motor Vehicle Accidents	21.1		19.5	
Diabetes mellitus	25.1		22.0	
Alzheimer's disease	22.9		19.8	
Influenza and pneumonia	23.0		20.4	
Intentional self-harm (suicide)	14.9	20.1		
Chronic liver disease and cirrhosis	8.5		10.3	
Nephritis, nephrotic syndrome and nephrosis (diseases of the kidneys)	8.2		5.6	
Homicide	2.4		2.7	
Injury by Firearm	12.1		15.7	
Alcohol-induced	8.7		9.9	
Drug-induced	6.3		8.4	

1. Average annual age-adjusted rate per 100,000 population, with the exception of the female breast cancer rate which is per 100,000 females and prostate cancer rate which is per 100,000 males.

Infant Deaths	Idaho Rate	District 1		
		District 1 Rate is Significantly Higher than the State Rate	District 1 Rate Does Not Differ Significantly from the State Rate	District 1 Rate is Significantly Lower than the State Rate
Infant death rate per 1,000 births ¹	6.8		8.1	
Congenital Malformations (birth defects) ²	195.5		161.1	
Sudden Infant Death Syndrome (SIDS) ²	80.5		146.5	

1. Infant death rate: Number of deaths to infants under one year of age per 1,000 live births.
2. Cause-specific infant death rate: Number of infant deaths by cause per 100,000 live births.

Special Note: Infant death rates for District 1 are based on a small data base. From 1999-2001, there were 55 deaths to District 1 infants under age of one. Of those deaths, 11 were due to birth defects and 10 were due to SIDS. Note that infant death rates based on small numbers (<20 deaths) are subject to wide variability in the confidence interval on the rate. Even though the District 1 SIDS rate is much higher than the Idaho rate, the difference is not statistically significant because the test for significance is based on the wide variability in the confidence interval of the rate. In other words, the smaller the number, the wider the confidence interval, and the more stringent the test for significance.

Note: See technical notes for information on age-adjusted rates and testing for significance.

Idaho and District 2 Resident Live Births
Three-Year Percent, 1999-2001

Nativity Indicator	Idaho Percent of Births	District 2 Percent of Births		
		District 2 is Significantly Higher than the State	District 2 Does Not Differ Significantly from the State	District 2 is Significantly Lower than the State
First Trimester Prenatal Care ¹	81.1	85.1		
Preterm Births ²	10.2			8.9
Low Birth Weight ³	6.4		5.7	
Births to Unmarried Mothers ⁴	21.8	24.8		
Tobacco Use During Pregnancy ⁵	11.8	15.1		

1. First trimester prenatal care is a positive indicator. The percent of mothers receiving first trimester prenatal care in District 2 was significantly lower or worse than the state.
2. Percents are based on records with known data for gestation. Preterm: Babies born prior to 37 completed weeks of gestation.
3. Percents are based on records with known data for birth weight. Low Birth Weight: Babies born weighing less than 2,500 grams.
4. Percents are based on records with known marital status.
5. Percents are based on records with known data for tobacco use.

Idaho and District 2 Resident Teen Pregnancy Rate
Three-Year Average Annual Rate per 1,000 females aged 15-17, 1999-2001

	Idaho Rate Per 1,000 females	District 2 Rate per 1,000 females		
		District 2 is Significantly Higher than State	District 2 Does Not Differ Significantly from the State	District 2 is Significantly Lower than the State
Teen Pregnancy Rate ¹	25.6			18.0

1. Teen Pregnancy Rate: Total number of pregnancies for teens age 15-17 per 1,000 females aged 15-17.

Idaho and District 2 Resident Deaths
Three-Year Average Annual Age-Adjusted Death Rates, 1999-2001

Cause of Death	Idaho Average Annual Age-Adjusted Death Rate ¹	District 2 Average Annual Age-Adjusted Death Rate ¹		
		District 2 Rate is Significantly Higher than the State Rate	District 2 Rate Does Not Differ Significantly from the State Rate	District 2 Rate is Significantly Lower than the State Rate
Diseases of heart	214.0		198.6	
Malignant neoplasms (cancer)	180.5		172.5	
Lung cancer	44.8		46.1	
Colorectal cancer	16.9		13.0	
Female breast cancer	24.8		25.1	
Prostate cancer	32.3		30.9	
Cerebrovascular diseases (stroke)	64.6		68.2	
Chronic lower respiratory diseases	49.0		46.2	
Accidents	44.4		46.1	
Motor Vehicle Accidents	21.1		22.8	
Diabetes mellitus	25.1		22.4	
Alzheimer's disease	22.9		23.6	
Influenza and pneumonia	23.0		21.4	
Intentional self-harm (suicide)	14.9		14.8	
Chronic liver disease and cirrhosis	8.5		5.7	
Nephritis, nephrotic syndrome and nephrosis (diseases of the kidneys)	8.2		8.3	
Homicide	2.4		1.6	
Injury by Firearm	12.1		12.9	
Alcohol-induced	8.7		9.8	
Drug-induced	6.3		3.8	

1. Average annual age-adjusted rate per 100,000 population, with the exception of the female breast cancer rate which is per 100,000 females and prostate cancer rate which is per 100,000 males.

Infant Deaths	Idaho Rate	District 2		
		District 2 Rate is Significantly Higher than the State Rate	District 2 Rate Does Not Differ Significantly from the State Rate	District 2 Rate is Significantly Lower than the State Rate
Infant death rate per 1,000 births ¹	6.8		7.4	
Congenital Malformations (birth defects) ²	195.5		147.7	
Sudden Infant Death Syndrome (SIDS) ²	80.5		118.2	

1. Infant death rate: Number of deaths to infants under one year of age per 1,000 live births.
2. Cause-specific infant death rate: Number of infant deaths by cause per 100,000 live births.

Special Note: Infant death rates for District 2 are based on a small data base. From 1999-2001, there were 25 deaths to District 2 infants under age of one. Of those deaths, 5 were due to birth defects and 4 were due to SIDS. Note that infant death rates based on small numbers (<20 deaths) are subject to wide variability in the confidence interval on the rate. Even though the District 2 SIDS rate is much higher than the Idaho rate, the difference is not statistically significant because the test for significance is based on the wide variability in the confidence interval of the rate. In other words, the smaller the number, the wider the confidence interval, and the more stringent the test for significance.

Note: See technical notes for information on age-adjusted rates and testing for significance.

Idaho and District 3 Resident Live Births
Three-Year Percent, 1999-2001

Nativity Indicator	Idaho Percent of Births	District 3 Percent of Births		
		District 3 is Significantly Higher than the State	District 3 Does Not Differ Significantly from the State	District 3 is Significantly Lower than the State
First Trimester Prenatal Care ¹	81.1			75.3
Preterm Births ²	10.2		11.0	
Low Birth Weight ³	6.4		6.3	
Births to Unmarried Mothers ⁴	21.8	25.8		
Tobacco Use During Pregnancy ⁵	11.8		11.3	

1. First trimester prenatal care is a positive indicator. The percent of mothers receiving first trimester prenatal care in District 3 was significantly lower or worse than the state.
2. Percents are based on records with known data for gestation. Preterm: Babies born prior to 37 completed weeks of gestation.
3. Percents are based on records with known data for birth weight. Low Birth Weight: Babies born weighing less than 2,500 grams.
4. Percents are based on records with known marital status.
5. Percents are based on records with known data for tobacco use.

Idaho and District 3 Resident Teen Pregnancy Rate
Three-Year Average Annual Rate per 1,000 females aged 15-17, 1999-2001

	Idaho Rate Per 1,000 females	District 3 Rate per 1,000 females		
		District 3 is Significantly Higher than State	District 3 Does Not Differ Significantly from the State	District 3 is Significantly Lower than the State
Teen Pregnancy Rate ¹	25.6	39.5		

1. Teen Pregnancy Rate: Total number of pregnancies for teens age 15-17 per 1,000 females aged 15-17.

Idaho and District 3 Resident Deaths
Three-Year Average Annual Age-Adjusted Death Rates, 1999-2001

Cause of Death	Idaho Average Annual Age-Adjusted Death Rate ¹	District 3 Average Annual Age-Adjusted Death Rate ¹		
		District 3 Rate is Significantly Higher than the State Rate	District 3 Rate Does Not Differ Significantly from the State Rate	District 3 Rate is Significantly Lower than the State Rate
Diseases of heart	214.0		224.5	
Malignant neoplasms (cancer)	180.5		190.8	
Lung cancer	44.8		50.7	
Colorectal cancer	16.9		18.0	
Female breast cancer	24.8		19.0	
Prostate cancer	32.3		34.0	
Cerebrovascular diseases (stroke)	64.6		67.0	
Chronic lower respiratory diseases	49.0		50.3	
Accidents	44.4		45.4	
Motor Vehicle Accidents	21.1		22.9	
Diabetes mellitus	25.1		29.9	
Alzheimer's disease	22.9		23.2	
Influenza and pneumonia	23.0		19.9	
Intentional self-harm (suicide)	14.9		15.2	
Chronic liver disease and cirrhosis	8.5		8.2	
Nephritis, nephrotic syndrome and nephrosis (diseases of the kidneys)	8.2		8.8	
Homicide	2.4		3.3	
Injury by Firearm	12.1		13.3	
Alcohol-induced	8.7		8.9	
Drug-induced	6.3			3.3

1. Average annual age-adjusted rate per 100,000 population, with the exception of the female breast cancer rate which is per 100,000 females and prostate cancer rate which is per 100,000 males.

Infant Deaths	Idaho Rate	District 3		
		District 3 Rate is Significantly Higher than the State Rate	District 3 Rate Does Not Differ Significantly from the State Rate	District 3 Rate is Significantly Lower than the State Rate
Infant death rate per 1,000 births ¹	6.8		6.8	
Congenital Malformations (birth defects) ²	195.5		207.0	
Sudden Infant Death Syndrome (SIDS) ²	80.5		78.8	

1. Infant death rate: Number of deaths to infants under one year of age per 1,000 live births.
2. Cause-specific infant death rate: Number of infant deaths by cause per 100,000 live births.

Special Note: Infant death rates for District 3 are based on a small data base. From 1999-2001, there were 69 deaths to District 3 infants under age of one. Of those deaths, 21 were due to birth defects and 8 were due to SIDS. Note that infant death rates based on small numbers (<20 deaths) are subject to wide variability in the confidence interval on the rate.

Note: See technical notes for information on age-adjusted rates and testing for significance.

Idaho and District 4 Resident Live Births
Three-Year Percent, 1999-2001

Nativity Indicator	Idaho Percent of Births	District 4 Percent of Births		
		District 4 is Significantly Higher than the State	District 4 Does Not Differ Significantly from the State	District 4 is Significantly Lower than the State
First Trimester Prenatal Care ¹	81.1	85.5		
Preterm Births ²	10.2		10.4	
Low Birth Weight ³	6.4		6.3	
Births to Unmarried Mothers ⁴	21.8			19.2
Tobacco Use During Pregnancy ⁵	11.8			8.7

1. First trimester prenatal care is a positive indicator. The percent of mothers receiving first trimester prenatal care in District 4 was significantly lower or worse than the state.
2. Percents are based on records with known data for gestation. Preterm: Babies born prior to 37 completed weeks of gestation.
3. Percents are based on records with known data for birth weight. Low Birth Weight: Babies born weighing less than 2,500 grams.
4. Percents are based on records with known marital status.
5. Percents are based on records with known data for tobacco use.

Idaho and District 4 Resident Teen Pregnancy Rate
Three-Year Average Annual Rate per 1,000 females aged 15-17, 1999-2001

	Idaho Rate Per 1,000 females	District 4 Rate per 1,000 females		
		District 4 is Significantly Higher than State	District 4 Does Not Differ Significantly from the State	District 4 is Significantly Lower than the State
Teen Pregnancy Rate ¹	25.6			23.1

1. Teen Pregnancy Rate: Total number of pregnancies for teens age 15-17 per 1,000 females aged 15-17.

Idaho and District 4 Resident Deaths
Three-Year Average Annual Age-Adjusted Death Rates, 1999-2001

Cause of Death	Idaho Average Annual Age-Adjusted Death Rate ¹	District 4 Average Annual Age-Adjusted Death Rate ¹		
		District 4 Rate is Significantly Higher than the State Rate	District 4 Rate Does Not Differ Significantly from the State Rate	District 4 Rate is Significantly Lower than the State Rate
Diseases of heart	214.0		200.7	
Malignant neoplasms (cancer)	180.5		186.5	
Lung cancer	44.8		49.2	
Colorectal cancer	16.9		15.4	
Female breast cancer	24.8		26.3	
Prostate cancer	32.3		30.7	
Cerebrovascular diseases (stroke)	64.6			54.4
Chronic lower respiratory diseases	49.0		48.4	
Accidents	44.4			27.8
Motor Vehicle Accidents	21.1			12.7
Diabetes mellitus	25.1			18.1
Alzheimer's disease	22.9		26.4	
Influenza and pneumonia	23.0		21.7	
Intentional self-harm (suicide)	14.9		13.1	
Chronic liver disease and cirrhosis	8.5		8.0	
Nephritis, nephrotic syndrome and nephrosis (diseases of the kidneys)	8.2		7.9	
Homicide	2.4		1.5	
Injury by Firearm	12.1		9.9	
Alcohol-induced	8.7		8.0	
Drug-induced	6.3		7.2	

1. Average annual age-adjusted rate per 100,000 population, with the exception of the female breast cancer rate which is per 100,000 females and prostate cancer rate which is per 100,000 males.

Infant Deaths	Idaho Rate	District 4		
		District 4 Rate is Significantly Higher than the State Rate	District 4 Rate Does Not Differ Significantly from the State Rate	District 4 Rate is Significantly Lower than the State Rate
Infant death rate per 1,000 births ¹	6.8		5.7	
Congenital Malformations (birth defects) ²	195.5		182.8	
Sudden Infant Death Syndrome (SIDS) ²	80.5		48.8	

1. Infant death rate: Number of deaths to infants under one year of age per 1,000 live births.
2. Cause-specific infant death rate: Number of infant deaths by cause per 100,000 live births.

Special Note: Infant death rates for District 4 are based on a small data base. From 1999-2001, there were 94 deaths to District 4 infants under age of one. Of those deaths, 30 were due to birth defects and 8 were due to SIDS. Note that infant death rates based on small numbers (<20 deaths) are subject to wide variability in the confidence interval on the rate. Even though the District 4 SIDS rate is much lower than the Idaho rate, the difference is not statistically significant because the test for significance is based on the wide variability in the confidence interval of the rate. In other words, the smaller the number, the wider the confidence interval, and the more stringent the test for significance.

Note: See technical notes for information on age-adjusted rates and testing for significance.

Idaho and District 5 Resident Live Births
Three-Year Percent, 1999-2001

Nativity Indicator	Idaho Percent of Births	District 5 Percent of Births		
		District 5 is Significantly Higher than the State	District 5 Does Not Differ Significantly from the State	District 5 is Significantly Lower than the State
First Trimester Prenatal Care ¹	81.1			73.7
Preterm Births ²	10.2		10.6	
Low Birth Weight ³	6.4	7.2		
Births to Unmarried Mothers ⁴	21.8	24.6		
Tobacco Use During Pregnancy ⁵	11.8	13.3		

1. First trimester prenatal care is a positive indicator. The percent of mothers receiving first trimester prenatal care in District 5 was significantly lower or worse than the state.
2. Percents are based on records with known data for gestation. Preterm: Babies born prior to 37 completed weeks of gestation.
3. Percents are based on records with known data for birth weight. Low Birth Weight: Babies born weighing less than 2,500 grams.
4. Percents are based on records with known marital status.
5. Percents are based on records with known data for tobacco use.

Idaho and District 5 Resident Teen Pregnancy Rate
Three-Year Average Annual Rate per 1,000 females aged 15-17, 1999-2001

	Idaho Rate Per 1,000 females	District 5 Rate per 1,000 females		
		District 5 is Significantly Higher than State	District 5 Does Not Differ Significantly from the State	District 5 is Significantly Lower than the State
Teen Pregnancy Rate ¹	25.6	29.7		

1. Teen Pregnancy Rate: Total number of pregnancies for teens age 15-17 per 1,000 females aged 15-17.

Idaho and District 5 Resident Deaths
Three-Year Average Annual Age-Adjusted Death Rates, 1999-2001

Cause of Death	Idaho Average Annual Age-Adjusted Death Rate ¹	District 5 Average Annual Age-Adjusted Death Rate ¹		
		District 5 Rate is Significantly Higher than the State Rate	District 5 Rate Does Not Differ Significantly from the State Rate	District 5 Rate is Significantly Lower than the State Rate
Diseases of heart	214.0		199.4	
Malignant neoplasms (cancer)	180.5			164.1
Lung cancer	44.8		37.6	
Colorectal cancer	16.9		15.1	
Female breast cancer	24.8		28.5	
Prostate cancer	32.3		28.2	
Cerebrovascular diseases (stroke)	64.6		57.6	
Chronic lower respiratory diseases	49.0		49.2	
Accidents	44.4	64.3		
Motor Vehicle Accidents	21.1	35.3		
Diabetes mellitus	25.1		23.3	
Alzheimer's disease	22.9		24.6	
Influenza and pneumonia	23.0		25.7	
Intentional self-harm (suicide)	14.9		13.1	
Chronic liver disease and cirrhosis	8.5		7.9	
Nephritis, nephrotic syndrome and nephrosis (diseases of the kidneys)	8.2		9.8	
Homicide	2.4		2.6	
Injury by Firearm	12.1		12.0	
Alcohol-induced	8.7		7.0	
Drug-induced	6.3		5.9	

1. Average annual age-adjusted rate per 100,000 population, with the exception of the female breast cancer rate which is per 100,000 females and prostate cancer rate which is per 100,000 males.

Infant Deaths	Idaho Rate	District 5		
		District 5 Rate is Significantly Higher than the State Rate	District 5 Rate Does Not Differ Significantly from the State Rate	District 5 Rate is Significantly Lower than the State Rate
Infant death rate per 1,000 births ¹	6.8		8.9	
Congenital Malformations (birth defects) ²	195.5		219.6	
Sudden Infant Death Syndrome (SIDS) ²	80.5		129.1	

1. Infant death rate: Number of deaths to infants under one year of age per 1,000 live births.
2. Cause-specific infant death rate: Number of infant deaths by cause per 100,000 live births.

Special Note: Infant death rates for District 5 are based on a small data base. From 1999-2001, there were 69 deaths to District 5 infants under age of one. Of those deaths, 17 were due to birth defects and 10 were due to SIDS. Note that infant death rates based on small numbers (<20 deaths) are subject to wide variability in the confidence interval on the rate. Even though the District 5 SIDS rate is much higher than the Idaho rate, the difference is not statistically significant because the test for significance is based on the wide variability in the confidence interval of the rate. In other words, the smaller the number, the wider the confidence interval, and the more stringent the test for significance.

Note: See technical notes for information on age-adjusted rates and testing for significance.

Idaho and District 6 Resident Live Births
Three-Year Percent, 1999-2001

Nativity Indicator	Idaho Percent of Births	District 6 Percent of Births		
		District 6 is Significantly Higher than the State	District 6 Does Not Differ Significantly from the State	District 6 is Significantly Lower than the State
First Trimester Prenatal Care ¹	81.1	83.4		
Preterm Births ²	10.2	11.4		
Low Birth Weight ³	6.4		7.0	
Births to Unmarried Mothers ⁴	21.8			19.6
Tobacco Use During Pregnancy ⁵	11.8			10.7

1. First trimester prenatal care is a positive indicator. The percent of mothers receiving first trimester prenatal care in District 6 was significantly lower or worse than the state.
2. Percents are based on records with known data for gestation. Preterm: Babies born prior to 37 completed weeks of gestation.
3. Percents are based on records with known data for birth weight. Low Birth Weight: Babies born weighing less than 2,500 grams.
4. Percents are based on records with known marital status.
5. Percents are based on records with known data for tobacco use.

Idaho and District 6 Resident Teen Pregnancy Rate
Three-Year Average Annual Rate per 1,000 females aged 15-17, 1999-2001

	Idaho Rate Per 1,000 females	District 6 Rate per 1,000 females		
		District 6 is Significantly Higher than State	District 6 Does Not Differ Significantly from the State	District 6 is Significantly Lower than the State
Teen Pregnancy Rate ¹	25.6			20.3

1. Teen Pregnancy Rate: Total number of pregnancies for teens age 15-17 per 1,000 females aged 15-17.

Idaho and District 6 Resident Deaths
Three-Year Average Annual Age-Adjusted Death Rates, 1999-2001

Cause of Death	Idaho Average Annual Age-Adjusted Death Rate ¹	District 6 Average Annual Age-Adjusted Death Rate ¹		
		District 6 Rate is Significantly Higher than the State Rate	District 6 Rate Does Not Differ Significantly from the State Rate	District 6 Rate is Significantly Lower than the State Rate
Diseases of heart	214.0	240.8		
Malignant neoplasms (cancer)	180.5		165.3	29.7
Lung cancer	44.8			
Colorectal cancer	16.9		14.8	
Female breast cancer	24.8		25.4	
Prostate cancer	32.3		40.1	
Cerebrovascular diseases (stroke)	64.6		58.0	
Chronic lower respiratory diseases	49.0		47.1	
Accidents	44.4		51.5	
Motor Vehicle Accidents	21.1		23.2	
Diabetes mellitus	25.1	35.4		
Alzheimer's disease	22.9		17.5	
Influenza and pneumonia	23.0	33.9		
Intentional self-harm (suicide)	14.9		13.8	
Chronic liver disease and cirrhosis	8.5		12.3	
Nephritis, nephrotic syndrome and nephrosis (diseases of the kidneys)	8.2		9.8	
Homicide	2.4		3.2	
Injury by Firearm	12.1		10.8	
Alcohol-induced	8.7		11.1	
Drug-induced	6.3		6.6	

1. Average annual age-adjusted rate per 100,000 population, with the exception of the female breast cancer rate which is per 100,000 females and prostate cancer rate which is per 100,000 males.

Infant Deaths	Idaho Rate	District 6		
		District 6 Rate is Significantly Higher than the State Rate	District 6 Rate Does Not Differ Significantly from the State Rate	District 6 Rate is Significantly Lower than the State Rate
Infant death rate per 1,000 births ¹	6.8		5.8	
Congenital Malformations (birth defects) ²	195.5		206.1	
Sudden Infant Death Syndrome (SIDS) ²	80.5		60.6	

1. Infant death rate: Number of deaths to infants under one year of age per 1,000 live births.
2. Cause-specific infant death rate: Number of infant deaths by cause per 100,000 live births.

Special Note: Infant death rates for District 6 are based on a small data base. From 1999-2001, there were 48 deaths to District 6 infants under age of one. Of those deaths, 17 were due to birth defects and 5 were due to SIDS. Note that infant death rates based on small numbers (<20 deaths) are subject to wide variability in the confidence interval on the rate. Even though the District 6 SIDS rate is much lower than the Idaho rate, the difference is not statistically significant because the test for significance is based on the wide variability in the confidence interval of the rate. In other words, the smaller the number, the wider the confidence interval, and the more stringent the test for significance.

Note: See technical notes for information on age-adjusted rates and testing for significance.

Idaho and District 7 Resident Live Births
Three-Year Percent, 1999-2001

Nativity Indicator	Idaho Percent of Births	District 7 Percent of Births		
		District 7 is Significantly Higher than the State	District 7 Does Not Differ Significantly from the State	District 7 is Significantly Lower than the State
First Trimester Prenatal Care ¹	81.1	85.7		
Preterm Births ²	10.2		9.5	
Low Birth Weight ³	6.4		6.6	
Births to Unmarried Mothers ⁴	21.8			16.1
Tobacco Use During Pregnancy ⁵	11.8			10.0

1. First trimester prenatal care is a positive indicator. The percent of mothers receiving first trimester prenatal care in District 7 was significantly lower or worse than the state.
2. Percents are based on records with known data for gestation. Preterm: Babies born prior to 37 completed weeks of gestation.
3. Percents are based on records with known data for birth weight. Low Birth Weight: Babies born weighing less than 2,500 grams.
4. Percents are based on records with known marital status.
5. Percents are based on records with known data for tobacco use.

Idaho and District 7 Resident Teen Pregnancy Rate
Three-Year Average Annual Rate per 1,000 females aged 15-17, 1999-2001

	Idaho Rate Per 1,000 females	District 7 Rate per 1,000 females		
		District 7 is Significantly Higher than State	District 7 Does Not Differ Significantly from the State	District 7 is Significantly Lower than the State
Teen Pregnancy Rate ¹	25.6			18.4

1. Teen Pregnancy Rate: Total number of pregnancies for teens age 15-17 per 1,000 females aged 15-17.

Idaho and District 7 Resident Deaths
Three-Year Average Annual Age-Adjusted Death Rates, 1999-2001

Cause of Death	Idaho Average Annual Age-Adjusted Death Rate ¹	District 7 Average Annual Age-Adjusted Death Rate ¹		
		District 7 Rate is Significantly Higher than the State Rate	District 7 Rate Does Not Differ Significantly from the State Rate	District 7 Rate is Significantly Lower than the State Rate
Diseases of heart	214.0		230.1	35.1
Malignant neoplasms (cancer)	180.5		171.8	
Lung cancer	44.8			
Colorectal cancer	16.9		20.3	
Female breast cancer	24.8		23.3	
Prostate cancer	32.3		30.1	
Cerebrovascular diseases (stroke)	64.6		71.5	
Chronic lower respiratory diseases	49.0		47.9	
Accidents	44.4		52.6	
Motor Vehicle Accidents	21.1		22.3	
Diabetes mellitus	25.1		31.5	
Alzheimer's disease	22.9		21.8	
Influenza and pneumonia	23.0		19.7	
Intentional self-harm (suicide)	14.9		14.7	
Chronic liver disease and cirrhosis	8.5		5.7	
Nephritis, nephrotic syndrome and nephrosis (diseases of the kidneys)	8.2		7.7	
Homicide	2.4		2.8	
Injury by Firearm	12.1		11.8	
Alcohol-induced	8.7		6.9	
Drug-induced	6.3		7.1	

1. Average annual age-adjusted rate per 100,000 population, with the exception of the female breast cancer rate which is per 100,000 females and prostate cancer rate which is per 100,000 males.

Infant Deaths	Idaho Rate	District 7		
		District 7 Rate is Significantly Higher than the State Rate	District 7 Rate Does Not Differ Significantly from the State Rate	District 7 Rate is Significantly Lower than the State Rate
Infant death rate per 1,000 births ¹	6.8		6.8	
Congenital Malformations (birth defects) ²	195.5		222.1	
Sudden Infant Death Syndrome (SIDS) ²	80.5		49.4	

1. Infant death rate: Number of deaths to infants under one year of age per 1,000 live births.
2. Cause-specific infant death rate: Number of infant deaths by cause per 100,000 live births.

Special Note: Infant death rates for District 7 are based on a small data base. From 1999-2001, there were 55 deaths to District 7 infants under age of one. Of those deaths, 18 were due to birth defects and 4 were due to SIDS. Note that infant death rates based on small numbers (<20 deaths) are subject to wide variability in the confidence interval on the rate. Even though the District 7 SIDS rate is much lower than the Idaho rate, the difference is not statistically significant because the test for significance is based on the wide variability in the confidence interval of the rate. In other words, the smaller the number, the wider the confidence interval, and the more stringent the test for significance.

Note: See technical notes for information on age-adjusted rates and testing for significance.

DEFINITIONS AND FORMULAS

AGE-ADJUSTED DEATH RATE (DIRECT METHOD) -- number of deaths per 100,000 standard population. Age-adjusted death rates are artificial measurements and should be used only to compare to other age-adjusted death rates calculated using the same standard population. Idaho and U.S. age-adjusted rates shown were calculated using the 2000 population estimate as the standard population.

$$\frac{\text{Sum of (age-specific death rates per 100,000 for selected population x standard population in corresponding age groups)}}{\text{Sum of standard population}}$$

ALCOHOL-INDUCED DEATHS -- includes alcoholic psychoses, alcohol dependence syndrome, nondependent abuse of alcohol, alcoholic polyneuropathy, alcoholic cardiomyopathy, alcoholic gastritis, chronic liver disease and cirrhosis -- specified as alcoholic, excessive blood level of alcohol, and accidental poisoning by alcohol, not elsewhere classified. Alcohol-induced deaths do not include accidents, homicides, and other causes indirectly related to alcohol use. This category also excludes newborn deaths associated with maternal alcohol use.

DRUG-INDUCED DEATHS -- includes deaths due to drug psychosis, drug dependence, nondependent use of drugs not including alcohol and tobacco; accidental poisoning by drugs, medicaments, and biologicals; suicide by drugs, medicaments, and biologicals, assault from poisoning by drugs and medicaments, and poisoning by drugs, medicaments, and biologicals, undetermined whether accidental or purposely inflicted. Drug-induced deaths do not include accidents, homicides, and other causes indirectly related to drug use. Also excluded are newborn deaths associated with mother's drug use.

FIREARM INJURY DEATHS -- includes accidental, intentional self-harm (suicide), assault (homicide), undetermined intent, and legal intervention involving firearm discharge. Deaths from injury by firearms exclude deaths due to explosives and other causes indirectly related to firearms.

FIRST TRIMESTER CARE -- beginning prenatal care in the first 3 months of pregnancy

FIRST TRIMESTER CARE RATE (percent) -- number of live births to women receiving prenatal care in the first trimester care of pregnancy per 100 live births with known data for prenatal care

$$\frac{\text{live births to women receiving first trimester care}}{\text{live births with stated month of prenatal care of mother}} \times 100$$

INFANT DEATH -- death of an infant under 1 year of age

INFANT MORTALITY RATE -- number of infant deaths per 1,000 live births

$$\frac{\text{infant deaths}}{\text{live births}} \times 1,000$$

CAUSE-SPECIFIC INFANT MORTALITY RATE -- number of infant deaths from a specific cause per 100,000 live births

$$\frac{\text{infant deaths from specific cause}}{\text{live births}} \times 100,000$$

LOW BIRTH WEIGHT -- a live birth weighing under 2,500 grams (5½ pounds or less)

LOW BIRTH WEIGHT RATE (percent) -- number of low birth weight live births per 100 live births with stated birth weight

$$\frac{\text{low birth weight live births}}{\text{live births with stated birth weight}} \times 100$$

DEFINITIONS AND FORMULAS (continued)

OUT-OF-WEDLOCK BIRTH -- a live birth to a woman who was not married at conception, birth, or anytime between

OUT-OF-WEDLOCK RATE (percent) -- number of out-of-wedlock live births per 100 live births

$$\frac{\text{out-of-wedlock live births}}{\text{live births}} \times 100$$

PRETERM BIRTH -- a baby born at less than 37 completed weeks of gestation

PRETERM BIRTH RATE (percent) -- number of preterm live births per 100 live births with known data for length of gestation

$$\frac{\text{preterm live births}}{\text{live births with stated gestation}} \times 100$$

RESIDENCE DATA -- data allocated by place of residence of the registrant, or by place of residence of the infant's mother (births, stillbirths)

TEEN PREGNANCY -- includes live births, induced abortions, and stillbirths. In this report, teen pregnancy is based on teens aged 15-17.

TEEN PREGNANCY RATE -- number of pregnancies to teens aged 15-17 per 1,000 females aged 15-17

$$\frac{\text{live births + stillbirths + abortions}}{\text{female population aged 15-17}} \times 1,000$$

TECHNICAL NOTES

Age-Adjusted Mortality Rates Standardized to the Year 2000 U.S. Standard

Age adjustment is a statistical technique used to standardize rates. The technique is employed when comparing two or more populations with different age distributions. Age-adjusted rates are recommended when making comparisons in the rates of age-related health events, such as deaths, between different populations or for comparing trends in a given population over time. Age-adjusted rates are artificial measures for comparison purposes only and should not be used to measure the absolute magnitude of a health issue. To allow for comparison, the same standard population must be used. If different standard populations are used to compute the age-adjusted rates (1940 and 2000, for example), then the age-adjusted rates are NOT comparable. Statistically, an age-adjusted rate is a weighted average of the age-specific death rates, where the weights represent the fixed population proportions by age.

Beginning with data (calendar) year 1999, the National Center for Health Statistics (NCHS) implemented a new standard for age-adjusted death rates. The new standard is based on year 2000 U.S. population, and it replaces the existing 1940 standard million population that has been widely used for over 50 years. The reasons for changing to the year 2000 standard are two-fold. One, although the 1940 standard was widely used, at least 3 different standards have been employed by federal and state agencies. The use of a single age-adjustment standard by federal agencies will help alleviate confusion and misunderstanding among data users. Two, the 1940 standard has been perceived as outdated and incompatible with the current and older age structure of the population.¹

Average annual age-adjusted rates for 1993-1995, 1996-1998, and 1999-2001 in this report were standardized to year 2000 U.S. standard million population (shown as proportion of the population or weights). The mid-year population for each three-year period was used to calculate the average-annual rates. Rates were developed using the following steps for the direct method:

- 1) Calculate **age-specific rates** for the 11 age groups used in the 2000 standard million:

$$\left[\frac{\text{Annual number of deaths in age group}}{(\text{Midyear population of age group for corresponding years}) \times (\text{number of years})} \right] \times 100,000$$

- 2) Calculate **expected number of deaths** for each age group.

$$(\text{2000 U.S. standard million population (weight) of age group}) \times (\text{Age-specific rate})$$

- 3) Calculate **age-adjusted rate per 100,000 persons**.

$$(\text{Sum of expected deaths for all age groups})$$

1. "Age Standardization of Death Rates: Implementation of the Year 2000 Standard," National Vital Statistics Reports, National Center for Health Statistics, Vol. 47, Number 3, October 7, 1998.

Age-adjusted Rate Example:

Age Group	Total Idaho Deaths due to Diseases of the Heart (1999-2001)	Midyear Population (April 1, 2000)	Average Annual Age-Specific Rate Per 100,000	Year 2000 U.S. Standard Weights	Expected Deaths (Age-Specific Rate x U.S. Standard Weight)	Average Annual Age-Adjusted Rate
Total	7,516	1,293,953		1		214.0
<1	7	19,700	11.8	0.013818	0.2	
1-4	3	77,943	1.3	0.055317	0.1	
5-14	5	205,364	0.8	0.145565	0.1	
15-24	12	204,852	2.0	0.138646	0.3	
25-34	18	169,433	3.5	0.135573	0.5	
35-44	137	192,968	23.7	0.162613	3.8	
45-54	345	170,248	67.5	0.134834	9.1	
55-64	643	107,529	199.3	0.087247	17.4	
65-74	1,267	75,970	555.9	0.066037	36.7	
75-84	2,343	51,889	1,505.1	0.044842	67.5	
85+	2,736	18,057	5,050.7	0.015508	78.3	

Cause-of-Death Classification

Mortality statistics are compiled in accordance with the World Health Organization (WHO) regulations, which specify that member nations, including the United States, classify and code causes of death in accordance with the International Statistical Classification of Diseases and Related Health Problems. The tenth revision of the International Classification of Diseases (ICD-10) was implemented in the United States beginning with deaths occurring in 1999 and replaces the ninth revision of the ICD (ICD-9), which was used from 1979 through 1998. Some changes from ICD-9 to ICD-10 include:

1. ICD-10 is far more detailed than ICD-9, with about 8,000 categories compared with 4,000 categories.
2. ICD-10 uses 4-digit alphanumeric codes, compared with 4-digit numeric codes in ICD-9.
3. Some cause-of-death titles have been changed, and conditions have been regrouped.
4. Some cause-of-death coding rules have been changed.

Comparability Ratio

The change from ICD-9 to ICD-10 may result in discontinuities in cause-of-death trends. These discontinuities are measured using comparability ratios. The National Center for Health Statistics developed comparability ratios to measure the level of agreement between classification systems for causes of death. The comparability ratio is the result of a study completed by the NCHS in which a sample of U.S. mortality records were coded by both the new (ICD-10) and the old revision (ICD-9) codes.

$$\text{Comparability ratio: } \frac{\text{Number of deaths for a cause of death based on ICD-10 code(s)}}{\text{Number of deaths for a cause of death based on the most comparable ICD-9 code(s)}}$$

A comparability ratio of 1.00 indicates that the same number of deaths was assigned to a particular cause whether ICD-9 or ICD-10 was used. A comparability ratio of less than 1.00 indicates fewer deaths would be coded to the cause of death using ICD-10 compared with ICD-9, solely because of the revision of the ICD. For example, a ratio of 0.83 indicates there were 17 percent fewer deaths (1.00-0.83) for this cause because of the code revision. A comparability ratio of more than 1.00 indicates more deaths occurred from this cause using ICD-10 compared with ICD-9, only because of the implementation of ICD-10. A ratio of 1.19 indicates 19 percent more deaths (absolute difference of 1.00-1.19) were attributed to the cause using ICD-10 than would have been using ICD-9.

Because ICD-10 is more detailed than ICD-9, and because of changes in the coding rules, the ICD-9 codes most comparable to ICD-10 codes may or may not be the ICD-9 codes used to categorize cause of death from 1979-1998. The ICD-9 codes most comparable to ICD-10 codes are called Modified ICD-9 codes. For example, from 1979-1998, the ICD-9 codes used for Diseases of the heart were 390-398, 402, and 404-429. To compare with ICD-10, the Modified ICD-9 codes for Diseases of the heart changed to 390-398, 402, 404, and 410-429. Other examples of causes of death that were modified are Major cardiovascular diseases, Ischemic heart disease, All other forms of Chronic ischemic heart disease, Cerebrovascular diseases (stroke), Chronic lower respiratory diseases (formally called Chronic obstructive pulmonary disease), Other chronic lower respiratory diseases, and Accidents. For more information on Modified ICD-9 codes refer to the NCHS website at <http://www.cdc.gov/nchs/>.

ICD-9 Modified Data Example

From 1999-2001 there were 806 Idaho resident deaths from Influenza and pneumonia, deaths based on ICD-10 codes (J10-J18). In 1996-1998, there were 1,014 deaths from Influenza and pneumonia, based on the ICD-9 codes (480-487). Without modification, one would conclude the number of Influenza and pneumonia deaths decreased from 1996-1998 to 1999-2001. However, because of changes in coding rules for ICD, these two counts are not comparable. Beginning in 1999, a change in Rule 3, called the direct sequel rule, changed the way deaths are coded when pneumonia is listed as a condition leading to death. When pneumonia is listed on the death certificate with another cause of death, and it is obviously a direct consequence of that other cause, then the other cause is selected as the underlying cause of death. In ICD-10, this rule is applied more broadly than in ICD-9 and specifies many more causes for which pneumonia is considered a direct consequence. Thus, deaths classified as pneumonia in ICD-9 are classified in ICD-10 to many other causes.

The ICD-10 to ICD-9 comparability ratio for Influenza and pneumonia is 0.6982. In other words, the counts and rates for Influenza and pneumonia, when coded using ICD-10, were expected to decrease 30 percent beginning in 1999 only because of the introduction of ICD-10. To compare the number of Influenza and pneumonia deaths in 1996-1998 with the number of deaths in 1999-2001, multiply 1996-1998 data based on Modified ICD-9 codes by the comparability ratio.

Number of deaths in 1996-1998 based on Modified ICD-9 Codes (not comparable with 1999-2001 data)	X	Comparability Ratio	=	Number of deaths in 1996-1998, comparable with number of deaths in 1999-2001 (rounded)	Number of deaths in 1999-2001
1,014		.6982		708	806

The number of influenza and pneumonia deaths increased 13.8 percent from 1996-1998 to 1999-2001.

For the complete list of comparability ratios by cause of death refer to the NCHS website at <http://www.cdc.gov/nchs/> and refer to the NCHS report called "Deaths: Final Data for 1999" published in September 21, 2001. As of April 2003, the list from NCHS consisted of estimated ratios, which were used to modify data based on ICD-9 codes in this report. A list of final ratios is expected from NCHS later in 2003.

Health Districts

Idaho is comprised of 7 Health Districts and 7 Regions. The counties in each are the same with one exception. Butte County is located in Health District 6, but is in Region 7. This report provides data based on the Health Districts. See District map on page 52 or list of counties in each District.

Percent Change in Rate Over Time

To calculate percent change over time:

$$\frac{(\text{Most current year } (Y^2) - \text{Earliest year } (Y^1))}{\text{Earliest year } (Y^1)} \times 100$$

Percent change in District 1 rates for Diseases of Heart from 251.9 in 1993-1995 to 217.2 in 1999-2001:

$$\frac{(217.2-251.9)}{251.9} \times 100 = 13.8\% \text{ decrease}$$

Statistical Testing

District data may be compared with state data, other district's data, or district data may be reviewed over time. When reviewing the tables on mortality, keep in mind that mortality rates from 1993-1995 and 1996-1998 are based on modified ICD-9 codes and rates from 1999-2001 are based on ICD-10 codes. In addition, some rates are based on large number of births or deaths (100+) and some rates are based on small number of births or deaths (1-99) for the three-year period.

For this report, a conservative statistics test called the Confidence Overlap Test may be used to test for significance between rates. For each rate, a 95% confidence interval was calculated and is shown on the table. Confidence intervals are a measure of the variability in the data and are used to describe the uncertainty around a point estimate of a quantity, for example, an age-adjusted mortality rate. The Confidence Overlap Test compares the 95% confidence intervals of two rates. If the confidence intervals for two rates do not overlap, then the difference between the two rates would be significant at the 0.05 level. If the confidence intervals for two rates overlap, then there is no significant difference between the rates.

Confidence Overlap Test Example 1:

The age-adjusted rate for Diabetes Mellitus for Idaho was 25.1 deaths per 100,000 people and the 95% confidence interval was 23.5 – 26.8 from 1999-2001. During that time period, District 6 had the highest age-adjusted rate for Diabetes (35.4). The 95% confidence interval for District 6 was 29.6 – 41.1. The two 95% confidence intervals do not overlap, therefore there is a significant difference between District 6 rate and Idaho for the three-year period.

Idaho, Diabetes Mellitus 1999-2001		District 6, Diabetes Mellitus 1999-2001		The Confidence Intervals Do NOT Overlap, the rates differ significantly at the 95% level.
Rate	95% Confidence Interval	Rate	95% Confidence Interval	
25.1	23.5 – 26.8	35.4	29.6 – 41.1	

Confidence Overlap Test Example 2:

The District 6 Diabetes Mellitus rates in was 24.6 in 1993-1995 and 35.4 in 1999-2001. The 95% confidence interval in 1993-1995 was 19.7 - 30.2, which does overlap with the interval in 1999-2001; the rate did not increase significantly over time.

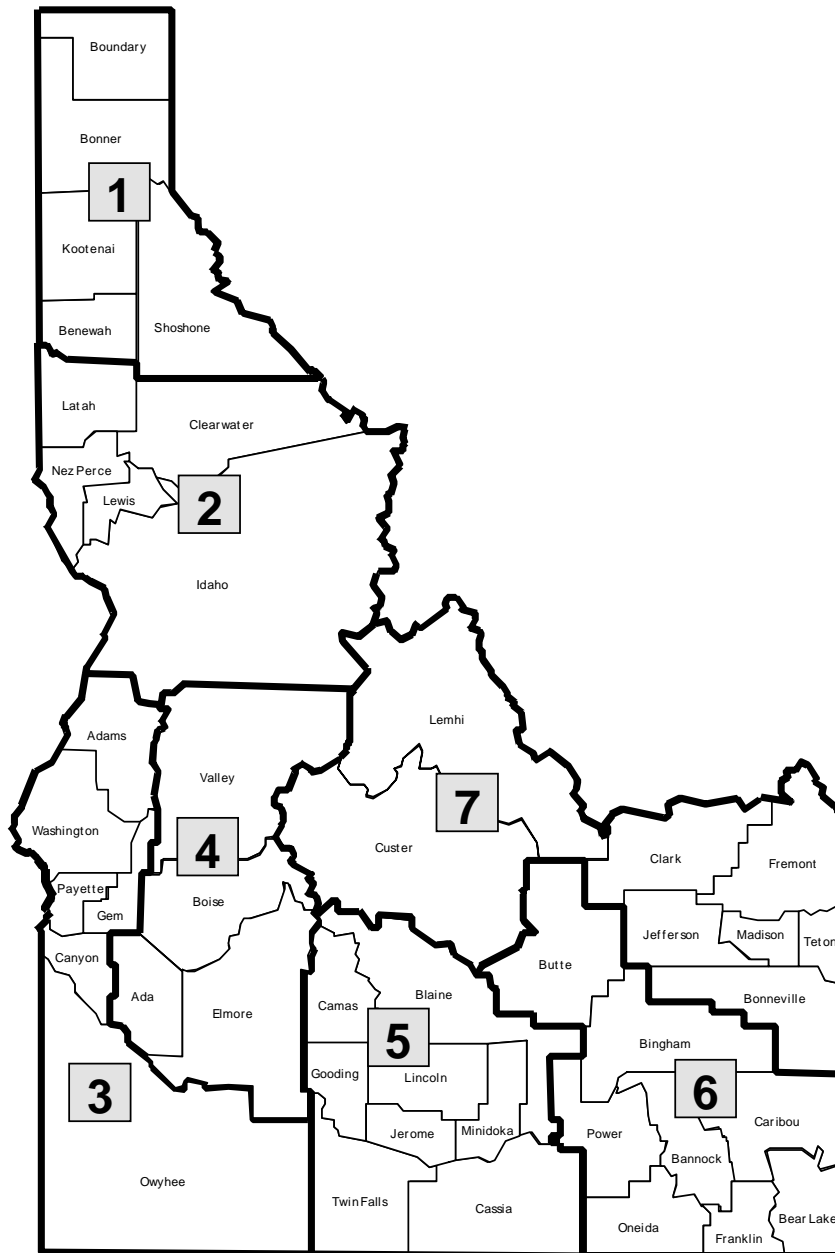
District 6, Diabetes Mellitus 1993-1995		District 6, Diabetes Mellitus 1999-2001		The Confidence Intervals Overlap, the rates did not change significantly over time at the 95% level.
Rate	95% Confidence Interval	Rate	95% Confidence Interval	
24.6	19.7 – 30.2	35.4	29.6 – 41.1	

Please note that the smaller the number of events upon which the rate is based, the larger the confidence interval will be. This clearly demonstrates the wider variability (and less reliability) of rates based on smaller numbers. **As a general rule, age-adjusted rates based on less than 20 events should be considered unstable and are not recommended for comparative use or in determining significance.**

National guidelines were followed to calculate rates and confidence intervals for age-adjusted rates based on ICD-9 codes modified by comparability ratios and age-adjusted rates based on ICD-10 codes. The formulas for calculating age-adjusted rates and 95% confidence intervals for rates based on ICD-9 and ICD-10 and based on large numbers and small number are provide in the NCHS report called “A Guide to State Implementation of ICD-10 For Mortality, Part II: Applying Comparability Ratios”. To access this report or to gain more information on confidence intervals refer to the NCHS website at <http://www.cdc.gov/nchs/>

SPECIAL NOTE: The use of the Confidence Overlap Test is crude and conservative. There are other statistical tests which take into account the larger pooled sample size of the two populations together, and therefore may provide a different result. This error is conservative; in some cases an appropriate statistical test would indicate a statistically significant difference even though the confidence intervals do overlap, falsely implying no significant difference. However, if two confidence intervals do not overlap using the Confidence Overlap Test, a comparable statistical test would always indicate a statistically significant difference.

Counties Comprising Idaho Public Health Districts



District 1	District 2	District 3	District 4	District 5	District 6	District 7
Benewah Bonner Boundary Kootenai Shoshone	Clearwater Idaho Latah Lewis Nez Perce	Adams Canyon Gem Owyhee Payette Washington	Ada Boise Elmore Valley	Blaine Camas Cassia Gooding Jerome Lincoln Minidoka Twin Falls	Bannock Bear Lake Bingham Butte Caribou Franklin Oneida Power	Bonneville Clark Custer Fremont Jefferson Lemhi Madison Teton